

Admission Form

Date of Admission: (dd/mm/yy)

Admission for: Blooming Buds Emerging Wings Little Hearts Summer Camp Tuitions Others

Particulars of the child (please fill all the details in capital letters only)

Name : Surname : Gender

Date of Birth : Age : Years : Months: Days:

Residential Address :

Languages spoken at home:

Likes and dislikes of the Child:

Previous schooling: Yes No

Siblings of the child and their details:

Health status of the child :

Is your child under any regular medication?

Any special instructions to the school about the child :

Particulars of Parents / Guardians

Father's Name : Educational Qualifications :

Occupation: Name of the organization :

Telephone: Res: Office: Mobile:

Mother's Name : Educational Qualifications :

Occupation: Name of the organisation :

Telephone : Res : Office : Mobile :

Declaration of the parent / guardian

I declare that the information given is correct and complete and I have not withheld any information. I agree to entrust my child to the care of the staff at **Little Wings** and that I shall not hold **Little Wings** responsible for any unforeseen mishap or accident.

Enclosures:

Please carry the following documents for Admission.

- 1. Original Date of birth certificate : Yes No
- 2. A copy of Blood group report : Yes No
- 3. A copy of health report from a Doctor (if any) : Yes No
- 4. Four recent passportsized photographs : Yes No
- 5. A copy of address proof : Yes No

Date

Sign