

Form No.

Bloom Public School

REGISTRATION FORM

1. Name of the child (block letters) \_\_\_\_\_ M  F

2. Date of Birth (in figures) \_\_\_\_\_

3. Registration for class \_\_\_\_\_

4. Previous School & Class \_\_\_\_\_

5. Age as on 1<sup>st</sup> April 2018 \_\_\_\_\_

6. Nationality \_\_\_\_\_

7. Mother's Name (block letters) \_\_\_\_\_

Tel. No./Mobile No. \_\_\_\_\_

General Interest \_\_\_\_\_

8. Father's Name (block letters) \_\_\_\_\_

Tel. No./Mobile No. \_\_\_\_\_

General Interest \_\_\_\_\_

9. Address (res.) & Tel. No. \_\_\_\_\_

10. Mother Tongue of the child \_\_\_\_\_

11. Medical History of the child \_\_\_\_\_

12. Details of any sibling (real brother / sister) Name \_\_\_\_\_

in Bloom Public School Class/Sec. \_\_\_\_\_ Admn. \_\_\_\_\_

13. Any other information \_\_\_\_\_

This is to certify that the facts given by me on the registration form are true. I understand that if any part of it is found to be false, this application will be cancelled. I also accept that registration does not ensure interaction/admission.

Signature of Parent/Guardian \_\_\_\_\_

Dated : \_\_\_\_\_

