

REGISTRATION FORM

Registration No.: _____

For Class :- _____

**Queen's Valley School**

Dwarka, New Delhi

Website: www.QueensValley.in Email: info@QueensValley.in

(Session: 2017-18)

Passport size
photograph of
FatherPassport size
photograph of
MotherPassport size
photograph of
the Child**Instructions for filling the form:**

- Write in capital letters.
- Please give complete and correct information and fill all the columns.
- Attach a Photostat copy of the Birth Certificate from the Municipal Corporation.
- Please attach 2 different proofs of your residence.

Details of the Child

First Name											

Last Name											

Date Of Birth (in figures)											
Date		Month	Year								

Date Of Birth (in words)											

Place of Birth	Nationality

Mother Tongue
Aadhar No. of the Child

Parents Details	Father	Mother	Guardian
Name			
Profession/Occupation			
Name of Organization			
Designation			
Office Address			
Tel.(Office)			
Tel. (Residence)			
Mobile			
Email			
Aadhar No.			

Address

Present Address	Permanent Address

Other Details (Tick (v) the appropriate with proof)

General	OBC	SC	ST	Minority Community (Specify)

Details of Children (including the child)

- i) No. of brothers/sisters _____
- ii) Details of school going children:

Name	Class	Institution	Admission No. (If in this school)

Is the school Transport required?

Yes	No
-----	----

Please register my daughter/ ward named above in your school. I shall produce the original documents at the time of admission.

SIGNATURE OF PARENT /GUARDIAN**UNDERTAKING**

I, _____ father/ mother/guardian of _____ hereby declare that information given above by me is based on facts and authentic records. I fully understand that the school, on accepting the registration form of my ward is not bound to grant admission and I also agree that the decision of the school authority regarding admission will be final and binding on me. Admission of my child may be cancelled if any information is found to be false.

SIGNATURE OF PARENT /GUARDIAN