



# Bright Scholar

SENIOR SECONDARY SCHOOL

School for the future

Photo

## Registration Form Session 201\_\_ - 201\_\_

Registration No. \_\_\_\_\_ Class \_\_\_\_\_

1. Name of the Child (in Block Letters) \_\_\_\_\_ Gender \_\_\_\_\_
2. Date of Birth (in Figures) \_\_\_\_\_ (in words) \_\_\_\_\_  
Age as on 01-04-201 \_\_\_\_\_ Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_  
Blood Group \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_
3. Place of Birth \_\_\_\_\_ Nationality \_\_\_\_\_
4. (a) Father's Name \_\_\_\_\_  
(b) Educational Qualification \_\_\_\_\_  
(c) Occupation \_\_\_\_\_ Designation \_\_\_\_\_  
(d) Office Address \_\_\_\_\_  
Mobile No. \_\_\_\_\_ E-mail \_\_\_\_\_
5. (a) Mother's Name \_\_\_\_\_  
(b) Educational Qualification \_\_\_\_\_  
(c) Occupation \_\_\_\_\_ Designation \_\_\_\_\_  
(d) Office Address \_\_\_\_\_  
Mobile No. \_\_\_\_\_ E-mail \_\_\_\_\_
6. Type of family Nuclear / Joint Family \_\_\_\_\_
7. Permanent Address \_\_\_\_\_  
Correspondence Address \_\_\_\_\_  
Phone No. \_\_\_\_\_ Mobile \_\_\_\_\_
8. Previous School Attended with date \_\_\_\_\_
9. Last class / Session \_\_\_\_\_ Medium \_\_\_\_\_ Result \_\_\_\_\_
10. In case of class 11th , Board (X) Roll No. \_\_\_\_\_
11. Class to which admission is sought \_\_\_\_\_ as day scholar/day boarder (tick mark)
12. Would you like to avail the School Transport ? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_
13. Any brother /sister studying in this school:  
1. Name \_\_\_\_\_ Class \_\_\_\_\_  
2. Name \_\_\_\_\_ Class \_\_\_\_\_
14. if SC/ST/OBC: Yes/ No. (if yes), submit the documents
15. Religion: \_\_\_\_\_ Caste: \_\_\_\_\_

Date \_\_\_\_\_

Signature of parent / Guardian \_\_\_\_\_

## Certificate from Parent /Guardian

1. I hereby certify that all facts given in the form are correct.
2. I have read the Prospectus and I agree to abide by the rules and regulations of the school.
3. I have no objection to my child/ward participating in the various activities organised in and out of the school.
4. The school will not be held responsible for any damage or illness, on account of injuries, fatal or otherwise, which may be sustained by my child/ward while taking part in games, sports or other indoor or outdoor activities at any time during his /her stay in the school. All expenses that may be incurred in the treatment of such injuries/damages will be borne by me, till the claim is settled by the Insurance Co. Ltd.
5. I authorise Bright Scholar to arrange for medical attention, treatment or emergency surgery, if needed, to the best judgement of the Principal.

Date:.....

.....  
Signature of Parents/Guardian

### Documents Submitted:

1. School leaving certificate from the previous school.
2. Passing certificate/Progress Card of the previous class.
3. Date of Birth certificate from CMO/Govt. office.
4. Adhar Card
5. Caste certificate/Haryana domicile

### FOR OFFICE USE

Admitted to class.....

Date:.....

Bright Scholar's Admission No.....

Dues Deposited : Rs.....

Receipt No.....

Date:.....

\_\_\_\_\_  
**Accountant**

\_\_\_\_\_  
**Principal**

### BRIGHT SCHOLAR SENIOR SECONDARY SCHOOL

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