

Registration **Form**

Name of the child:	Date of Birth:	Gender (Please put a tick):	Nationality of the child:
Name of the school the child is attending at present:	Studying in class:	Applying for class:	Medium of instruction:
Languages studying:			

PARENTS DETAIL	FATHER	MOTHER	LOCAL GUARDIAN (FOR BOARDERS ONLY)
Name:			
Date of Birth:			
Nationality:			
Academic Qualification:			
Occupation:			
Name of Organization:			
Office / Business AddrOffice / Business Address :			
Contact Number:			
Residential Address:			
E-mail address:			

