

REGISTRATION FORM

Registration No.: _____

For Class :- _____

**Queen's Valley School**

Sector 8, Dwarka, New Delhi

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

(Session: 2018-19)

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 Of Birth (in words)		
Date	Month	Year			

Place of Birth	Nationality

Mother Tongue	
Aadhar No. of the Child (Mandatory)	

Parents Details	Father	Mother	Guardian
Name			
Profession/Occupation			
Name of Organization			
Designation			
Office Address			
Tel.(Office)			
Tel. (Residence)			
Mobile			
Email (Mandatory)			
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 (Sibling/s of the child, if any)

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
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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

