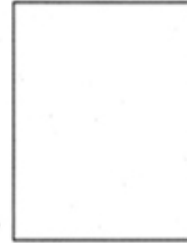


Registration No. _____

Date _____



M.G. MEMORIAL H.S. SCHOOL, MORENA

Application Form for Registration

Please register the name of my son / daughter/ ward for admission to class _____
in the school.

1. Name of the Student Miss/Master : _____
(in Block Letters)
2. Date of Birth

--	--

--	--

--	--	--	--

(in words and figures) : _____
3. Time of Birth

--	--

 hrs.

--	--

 min.

--	--

 second
4. Place of Birth : _____ Nationality : _____ Sex : _____ Religion : _____

Note : Please attach a copy of date of birth Certificate/Transfer certificate/Marksheet as the case may be.

5. a. Number of Father Mr. _____
b. Father's occupation _____
c. Office Address _____
d. Telephone No. (Office) : _____
6. a. Name of Mother Mrs. _____
b. Office Address (in Working) _____
c. Telephone No. (Office) : _____
7. Joint Monthly Income (Total Emoluments) _____
8. Residential Address _____
_____ Telephone No. _____
9. Name and address of the school where the child studied last _____
10. Date of Marriage (Parents) _____

10. Name and class of any brother / sister studying in this school.

	Name	Class	Section
(i)	_____	_____	_____
(ii)	_____	_____	_____
(iii)	_____	_____	_____

11. Category SC / ST / OBC / GENERAL

Cast _____ Religion _____

I have read the school prospectus. I shall abide by the rules and regulations of the school recorded therein. I agree to pay promptly all the prescribed fees, which may be revised by the school from time to time.

Date _____

Signature of Parents

FOR OFFICIAL USE ONLY

Admission No. _____ Date _____

Name of Student _____ Father's Name _____

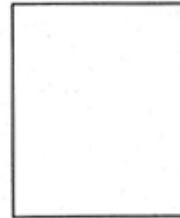
Mother's Name _____ Class _____

Subject _____ Date of Birth _____

Signature of Clerk

Signature of Principal

M.G. MEMORIAL H.S. SCHOOL, MORENA TRANSPORTATION FORM



We request that My Son / Daugher _____ of Class _____
Section _____ may to permitted to use the transport arranged / provided by the
school for his / her journey between _____ and M.G.M. Morena w.e.f. _____

Phone Numbers	Residential Address
Mobile _____	
Residence _____	

OR

We do not wish to use transport arranged / provided by the school for ouch child.

Declaration :

1. We undertake to pay the bus charges according to the rules in force from time to time and sudden hikes in the conveyance charges or increase in fuel prices or taxes.
2. We understand that it would be our responsibility to drop and pick-up our child at / from the specified bus stop.
3. We accept that the bus facility is extended to our ward at our own risk and responsibility.
4. We have read and do hereby consent to be terms and conditions regarding transportation.

Date _____

Signature of Parent

For School office use only

Transport (w.e.f.) _____ Bus number _____ Route _____

Signature of Transport In-charge