



Last Date for Registration

Please Fill your details in BLOCK letters

PERSONAL DETAILS

Name										Affix Passport size photograph here
First Name			Middle Name			Last Name/Surname				
Date of Birth										
D	D	M	M	Y	Y	Y	Y	Gender Male <input type="checkbox"/> Female <input type="checkbox"/>		
Email Address										
Father's/Guardian's Name										
First Name			Middle Name			Last Name/Surname				
Father's/Guardian's Occupation					Father's/Guardian's Contact No.					
Father's/Guardian's Email Address										

CORRESPONDENCE ADDRESS

House No./ Flat No.									
Road No./Name									
City/Town							PIN		
State									
Phone / (STD)					Mobile Number				
0	C	O	D	E					

ACADEMIC DETAILS OF STUDENT

Class Studying in : V VI VII VIII IX X XI XII OTHERS

School Name

SIGNATURE OF APPLICANT

SIGNATURE OF PARENT

FOR OFFICE USE

Registration No.Receipt No.....Programms.Class.School

Place.....Date.....

Academic Head's Signature.....



Terms and Conditions

1. All installments will have to be paid by 7th day of the due month, failing which Ed-wise Solutions reserves the right to terminate the Registration of the Student.
2. The Management reserves the right to change class timings / Class Frequency as per its convenience.
3. All Disputes are subject to Delhi Jurisdiction.
4. The Student can be rusticated from the course on disciplinary basis of which the whole discretion lies with the faculty.

Declaration

I have read and shall abide by the terms and conditions. I hereby declare that the information provided by me in this registration form is correct to the best of my knowledge.

.....
Signature of Applicant

.....
Signature of Parent