



Participant
Photograph
(Please paste here)

FORM No.:

REGISTRATION FORM

CLUB MEMBERSHIP / AFTER SCHOOL PROGRAM

PARTICIPANT DETAILS

STUDENT NAME: _____

RESIDENTIAL ADDRESS: _____

M F DATE OF BIRTH: _____ CLASS & GRADE: _____ ROLL No.: _____

SCHOOL NAME: _____

PARENT / GUARDIAN DETAILS (WHO SHOULD BE CONTACTED FOR COMMUNICATION)

PARENT/ GUARDIAN NAME: _____

BUSINESS NAME/ EMPLOYMENT: _____

PROFESSION / DESIGNATION: _____ TEL. NO.: _____

MOBILE (1): _____ E-MAIL (1) _____

MOBILE (2): _____ E-MAIL (2) _____

PROGRAM DETAILS

PROGRAM NAME: _____ CENTER: _____ BATCH No.: _____

DURATION OF COURSE: _____ MEMBERSHIP No.: _____ FEES: _____

I hereby declare that all the particulars stated in the form are true to the best of my knowledge. In the event of submission of fraudulent, incorrect or untrue information of any fact, I understand that my admission to the program is liable for cancellation. I further understand that my admission into the program is on the sole discretion of RoboKids Education and the said decision will be final and binding. The program organized by RoboKids Education is provided on LEGO & iKEN Products. Any damage or loss to the products or kits caused by mishandling of my child will be paid by me/us. All the LEGO & iKEN Products used in the program are assets of RoboKids Education and cannot be taken by students outside School/ Club for any purpose.

SIGNATURE OF PARENT/ GUARDIAN

DATE:

X

FOR PARENTS

RECEIPT No.: _____ MEMBERSHIP No.: _____ PROGRAM NAME: _____

STUDENT NAME: _____ BATCH No.: _____ FEES: _____

CASH/ CHEQUE: _____ CHEQUE No.: _____ BANK: _____

AUTHORIZED SIGNATORY

DATE:

X

