



# B L International Smart School

(Governed By B L Memorial Charitable Sansthan)  
(Affiliated to CBSE, Delhi, Affiliated No. : 1730684)

Mobile : 098297 00265, 07023170175 | Ph. : 01433-294129/30  
On Jaipur Road, Toda Rai Singh, District - Tonk Rajasthan (India) Pin-304505  
E-mail : blisstoda@gmail.com | Website : www.blisstoda.com

Please paste a passport size  
photograph of child

## Registration Form

Session :

(Note- Fill in the application form in English & Capital letter only)

Form No. ....

Name of the child (in capital letters) \_\_\_\_\_

Date of Birth (in figures) 

D	D	M	M	Y	Y
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 Tick Mark Category 

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gen	OBC	ST	SC	Other

In words \_\_\_\_\_

Gender : Male ☐ Female ☐ Class to which Admission is sought \_\_\_\_\_

Facilities : 1. Day School ☐ 2. Hostel ☐ 3. Bus ☐ 4. RTE Admission Yes ☐ No ☐ (Kindly put a tick Mark in the appropriate box)

Mother's Name \_\_\_\_\_

Qualification \_\_\_\_\_ Mother's Occupation \_\_\_\_\_

Telephone No / Mobile No. \_\_\_\_\_

Father's Name \_\_\_\_\_ Qualification \_\_\_\_\_

Father's Occupation (If business, please specify) \_\_\_\_\_

Telephone No/Mobile No. \_\_\_\_\_

Languages spoken at home \_\_\_\_\_ Annual income of the family in Rs: \_\_\_\_\_

Correspondence Address: \_\_\_\_\_

District : \_\_\_\_\_ State : \_\_\_\_\_ Pin Code : \_\_\_\_\_

Email ID : \_\_\_\_\_

Permanent Address : \_\_\_\_\_

District : \_\_\_\_\_ State : \_\_\_\_\_ Pin Code : \_\_\_\_\_

Email ID : \_\_\_\_\_

Guardian's name : \_\_\_\_\_

Relation with the child: \_\_\_\_\_

Correspondence Address: \_\_\_\_\_

District: \_\_\_\_\_ State: \_\_\_\_\_ Pin Code: \_\_\_\_\_

Email Address: \_\_\_\_\_ Mobile No: \_\_\_\_\_

**Previous School Details (if Any)**

Previous School Name: \_\_\_\_\_ Class: \_\_\_\_\_

**Parent's Declaration**

I/We understand and agree that Registration of my/our child don't guarantee her/his admission in the school and the registration fee or any fee is neither transferable nor refundable.

We are completely responsible for the behavior and safety of our ward in and out of the School premises. We accept to abide by all rules and regulations of the School enforced time to time. We promise to visit the School at least thrice in a year to know the progress of our ward. We know that the School reserves all rights to click & use photographs of our ward in any print and electronic media without taking permission from us. We have received School prospectus and the fees chart separately and having read, understand all points therein we promise to abide by all the School rules and regulations. We know that the fee once deposited is neither refundable nor transferable under any circumstances.

Signatures for Agreement:

Father.....Mother.....

Local Guardian (fi applicable).....

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

**Document Submitted**

(Admission will be provisional till the birth Certificate/School Transfer certificate is submitted)

Document	Submitted (Date)	Will Submit on (Date)
Date of Birth Certificate (Frist Time Admission)		
T.C.		
Report Card		
Adhar Card		

FOR OFFICE USE ONLY

Admitted Class:..... Section..... In Academic Year:.....

Enrollment No..... Fee Receipt No.....

Form Checked By:	Principal
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Remarks if any:.....