

* જે કોલેજ
* ડૉ. ફીલ્ડેસ સર્વો,
* કોથની સર્વો



Shreyas Foundation

Bringing out the best in each child

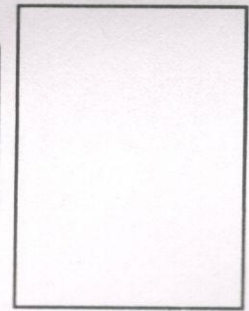
Shreyas Tekra,
Near Shreyas Railway Crossing,
Ambawadi, Ahmedabad-380015.
Ph. : 26601338 / 26601378 / 26601588
www.shreyasfoundation.in

FOR OFFICE USE

Rs. :

Receipt No. :

Date :



SHREYAS ACTIVITIES ADMISSION FORM

Date :

Name :

Address :

Phone No. :

Mobile No. :

Date of Birth :

Age : Yrs.

Gender : M F

School Name : Std :

Parent's Occupation :

Phone No. :

Mobile No. :

E-mail :

Please tick the applicable

Swimming : Skating : Football : Karate : Yoga : Horse Riding : Walking :

Membership : Batch : Timing :

As per Co-ordinator's instructions : is eligible / not eligible for
..... activity.

Date of Admission :

Co-ordinator's Sign :

I am enrolling my ward / myself for at Shreyas Foundation at my own risk. Shreyas Foundation will not be liable for any injury or damage.

Signature

(Parent to sign for those below 18)

Instructions :

- Right to admission reserves with Shreyas Foundation
- Members are expected to be punctual, regular and well behaved
- No coaching on Sunday and Shreyas Foundation Holidays

- Please do not bring any valuables. Member are responsible for their personal belongings
- For any queries parents are requested to contact Co-ordinator and not the coaches
- Carry I-card all the time
- Helmets are compulsory for skating & Horse - Riding
- **Fees are not refundable**

Medical Certificate for Swimming

The applicant is healthy and hygienically fit to join the Swimming Classes.

Heart Lungs Liver Skin

Lymph Gland Eyes I have examined the applicant thoroughly.

Sign of registered Medical
Officer with stamp

Date :