

SHIVAJI ENGLISH MEDIUM SCHOOL ,SASWAD [CBSE PATTERN]

SCHOOL EXCURSION / PICNIC / SPORTS EVENT

I hereby give my consent to my son / daughter to join excursion / picnic / sports event arranged by the school to _____

on _____.

I declare that I shall not hold the school responsible for any accident or mishap to my son / daughter during the excursion / picnic / sports event.

Student's Name : _____

Std - _____

Division - _____

Address of the student in full : _____

Mobile Number : Father : _____

Mother : _____

Is the student on any kind of medication ? If yes

Details : _____

[FOR SPORTS EVENT ONLY]

I have attached herewith the fitness certificate of the Doctor.

Signature of Father

Father's Name

Signature of Mother

Mother's Name
