



KAIVALYA VIDYA NIKETAN, LONAVLA REGISTRATION FORM

The Principal
Kaivalya Vidya Niketan
Lonavla

Sir/Madam

I wish to seek admission for my son/daughter _____

Who is presently studying _____ in _____

_____ (Name of the school) which is affiliated to STATE/CBSE/ICSE Board.

His/her name may be registered for admission to class _____ during the academic session 2015-16 whose details are as under:

- Parent's Name & Residential Address: _____

- Date of Birth: / /
- Present Class/ School: _____
- Telephone No. (Office): _____
- Telephone No (Residence): _____
- Mobile No : _____

I hereby deposit Rs.500/- for Registration for Admission in class _____. I would bring him/her to the school at 9.00hrs. on 23/02/2015 for admission test/interview if required.

Yours faithfully



Bus Form

Date: / /

The Principal
Kaivalya Vidya Niketa,
Lonavla

Dear Madam

I wish to avail the bus facility provided by the School.
My residential address is (Full address) as under:

Contact No: _____

Bus Stop : _____

I agree to abide by the timings, and pick up and drop points
as decided by the school .

Yours faithfully

Parent's Sign _____

Parent's Name _____

Name of Student & Class: _____