

Br. G. D. Patil Gymkhana, Shantiniketan.

Sangli

Shantiniketan Lokvidyapith,
Sangli - 416416 (Maharashtra)

MSPD CAMP

Fill in Capital Letters

Surname :

Name :

Father's Name :

Mother's Name :

Boy : Girl : E-mail :

Date of Birth :

Address :

Phone (with STD code) : Mobile :

Local Guardian :

Phone (with STD code) : Mobile :

Place :

DD Details (Fees should be paid in cash or DD drawn in the name of MSPD CAMP, Sangli)

Date :

Name of Bank:

Amount:

DD Date :

Participant's Signature

To
The working president ,
I seek an admission to my daughter/ son for the MSPD Camp organized during 30th April to 22nd May.
I have read all the rules, regulation and disciplinary notes of the camp.I agree the same & will not hold you responsible for any accident, loss or natural calamities, during the camp. I assure that he/she will not behave in indecent manner.
Kindly grant an admission.

Thanking you

(Admission Forms will be accepted till 25th April Only.)

Parent's Signature