



DELHI PUBLIC SCHOOL VADODARA
CIRCULAR

DPSV/CIRCULAR/2018-19/15
Date: 01 November, 2018

Dear Parent

We are pleased to inform you that your ward is selected for the Under-14 Boys State Khel Mahakumbh Football Tournament to be held at Sports Complex Godhra from 14 to 18 November 2018. Should you give your consent for your ward's participation, please fill in the **Consent Form** given here under. The students should report to the school at 07:00 a.m. on 14 November 2018.

For any query contact: Mr. Nimesh Rathod - +91 9737954945, 8160817228

PRINCIPAL

Consent From

The Principal

Delhi Public School
Vadodara

Date:- _____

I would like my ward _____ of Class _____ Sec _____ to participate in Under-14 Boys State Khel Mahakumbh Football Tournament at Sports Complex Godhra to be held from 14th to 18th Nov 2018.

I appreciate your assurance regarding the precautions for the safety of my ward. I indemnify the school and teacher against any mishap resulting in any harm that may be caused to my ward during the tournament.

Signature of the Parent:- _____ **Contact no:-** _____



DELHI PUBLIC SCHOOL VADODARA
CIRCULAR

DPSV/CIRCULAR/2018-19/15
Date: 24 October 2018

Dear Parent

We are pleased to inform you that your ward is selected for the Under-14 Boys State Khel Mahakumbh Football Tournament to be held at Sports Complex Godhra from 14 to 18 November 2018. Should you give your consent for your ward's participation, please fill in the **Consent Form** given here under. The students should report to the school at 07:00 a.m. on 14 November 2018.

For any query contact: Mr. Nimesh Rathod - +91 9737954945, 8160817228

PRINCIPAL

Consent From

The Principal

Delhi Public School
Vadodara

Date:- _____

I would like my ward _____ of Class _____ Sec _____ to participate in Under-14 Boys State Khel Mahakumbh Football Tournament at Sports Complex Godhra to be held from 14th to 18th Nov 2018.

I appreciate your assurance regarding the precautions for the safety of my ward. I indemnify the school and teacher against any mishap resulting in any harm that may be caused to my ward during the tournament.

Signature of the Parent:- _____ **Contact no:-** _____