

# AMITY INTERNATIONAL SCHOOL, VASUNDHARA

## PARENT TEACHER ASSOCIATION FORM

[Write in Capital Letters]

Dear Parents,

We welcome you as Member of the Parent Teacher Association. Kindly fill in the form given below.

Thanking you.

Yours faithfully,

Head of Institution

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**Admission No.** \_\_\_\_\_

Last Name of the child

First Name of the child

Gender

 Male  Female

Date of Birth

D	M	Y
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Date of Birth in Words

Religion

### FAMILY INFORMATION

#### Father/Guardian :

Name :	Age :	Nationality :
Educational Qualification :	Institution :	
Organisation Working for :	Office Address :	
Designation :		
Annual Income :	Tel.:	

#### Mother/Guardian :

Name :	Age :	Nationality :
Educational Qualification :	Institution :	
Organisation Working for :	Office Address :	
Designation :		
Annual Income :	Tel.:	

### RESIDENTIAL ADDRESS


### PHONE NOS.

Res.:
Off.:
Emergency:

Signature of Mother/Guardian \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Father/Guardian \_\_\_\_\_

Date: \_\_\_\_\_