

Date	[

ENQUIRY FORM

Day-Care | Pre Nursery | Activities

1.	Name of the Child					Gender :	М 🗌	F 🗌
2.	Date of Birth	Date Mont) [Year				
3.	Age as on 31st March							
4.	Nick name (if any)							
5.	Particulars of the siblings							
i)	Name _	Last Name			Middle Name		First Name	
	Date of Birth	Date Mont	_] [Year				
ii)	Name	Last Name		3	Middle Name		First Name	
	Date of Birth	Date Month		Year				
6.	Mother's Name							
	Qualification		Occupat	ion				
	Mobile No		Email II	D				
	Office address							
7.	Father's Name							
	Qualification							
	Mobile No		Email II	D				
	Office address							
8.	Residential address							
	City				Area I			
9.	Distance from school							
10.	How did you come to know	v about The Lea	arning Sta	tion _				