



G.D. Goenka Public School, Indirapuram

GDGPS/IP/2016-17/ACA-7

Date: 21 April, 2017

"Talent Wins Games but Teamwork Wins Championships"

Dear Parent

Warm Greetings!

Sports allow an individual to grow as a person and as an athlete, since it provides physical and emotional wellbeing, and a lot of intrinsic values that enhance social relationship, communication, healthy competition, and learning and self-reflection skills.

Aiming at building healthier citizens with a strong and sharp mind, we at G.D. Goenka Public school, Indirapuram organize sports academy in the evening to further enhance specific skills of different games. The details of the academy are given below. Children can choose any one of the following games.

S.NO	EVENT	TIME AND DAY	ONE TIME REGISTRATION AMOUNT	TIME SLOTS* (Sep,2016-Nov,2016)	TIME SLOTS* (Dec,2016-Feb,2017)	MONTHLY FEES
1.	FOOTBALL	Monday, Wednesday Friday	1200/-for outsiders	4.30pm to 6.30pm	3.30pm to 5.30pm	₹ 1000 /-
2.	BASKETBALL	Monday, Wednesday Friday	1200/-for outsiders	4.30pm to 6.30pm	3.30pm to 5.30pm	₹ 1000 /-
3.	CRICKET	Tuesday, Thursday Saturday	1200/-for outsiders	4.30pm to 6.30pm	3.30pm to 5.30pm	₹ 1200 /-
4.	LAWN TENNIS	Tuesday, Thursday Saturday	1200/-for outsiders	4.30pm to 6.30pm	3.30pm to 5.30pm	₹ 1200 /-

Participants are required to submit the duly filled consent form along with the fee. The fee is to be paid at the school account office on a monthly basis. The trainees shall have to wear proper sports kit. The school shall in no way be responsible for any injury/mishap to any trainees.

For any queries you may contact the school reception at 9999572500/9999574500-Ms. Manpreet Kaur for any grievances.

- Students can opt on trial basis for free in the month of April.

Warm regards

Dr. Kavita Sharma

Principal

G. D. GOENKA SPORTS ACADEMY
FORM OF APPLICATION
(PERSONAL PARTICULARS)

PASSPORT
SIZED
PHOTOGRAPH
OF THE
CANDIDATE

1. Name of candidate: _____
2. Father's/ Guardian's name: _____
3. Permanent Address: _____

4. Email: _____ Contact No: _____
5. Date of birth: _____ as on 1 September, 2016 _____ year _____ month _____ days.

6. _____ Educational _____ background:

(Please attach a certificate from the school principal certifying age/class)

6. Joining the Football / Basketball / Cricket / Lawn Tennis Sports academy(Please tick)

Playing background: (Please attach participation certificates)

7. Height: _____ Feet _____ Inches (in _____ cms) Weight: _____ kgs

9. History of medical illness (if any): _____

10. Any known congenital deformity: _____

Declaration: I _____ (Parent / Guardian's name)
of _____ hereby certify that the above information is authentic and true to the best of
my knowledge. In case any information is not found true, my ward will be disqualified.

(Candidates Signature)

(Guardian's/Parent's Signature)

CONSENT FORM

I _____ (Father/Mother/Guardian's) of _____ of Class
_____ Sec _____ permit my ward to participate in the after school academy. I undertake that
my ward is medically fit to participate in the above mentioned programme. I will make pick
and drop arrangements (to and from the school) for my ward.

Address: _____

Tel No. - _____ Signature of the Parent - _____