

BRIGHT SCHOOL : VADODARA
VIP Unit, Karelibaug
Affiliated to CBSE
Affiliation No. : 430978
REGISTRATION FORM : 2024-2025

- Child's Full Name : _____
 - Date of Birth : Date _____ Month _____ Year _____
(in words) _____
 - Class for which admission is sought : _____
 - Class in which child is presently studying : _____
 - School in which child is presently studying : _____
 - Place : _____ State : _____ Board : _____
 - Result of the Current Year : (Half Yearly) _____ Result of Previous Year (Annual) _____
 - Father's Full Name : _____
Qualification : _____ Contact Number : _____
Occupation and Designation : _____
 - Mother's Full Name : _____
Qualification : _____ Contact Number : _____
Occupation and Designation : _____
 - Contact Address : _____
 - Telephone (R) _____ Mobile No. _____
 - Sibling (Studying in any of the Units of Bright School) :
Name _____ Std. _____ Div. _____
 - Reference if any : _____
- Date : _____ Parent's Signature : _____

Note : The registration with the School for admission does not guarantee or confirm admission. The parents will be contacted by the School as and when the vacancy arises. Admission enquiries will not be entertained by the office.