**Registration form– Hill Side Academy**

Student Name:

Gender:

Birth Date:

Age:

Father’s Name:

Mother’s Name:

Father’s Mobile:

Mother’s Mobile:

Access to Smart Phone: Yes / No

Email address:

City:

State:

Address:  
Current school/College:

Current standard:

Which standard was English introduced?

How many years did you study English language?

**Check the Course(s) you are interested in:**

Fluency in Written and Spoken English

Basic Computers

**Course Fees:** Rs. 250 / Quarter

**Parent Consent**

Your permission is requested for your child to be enrolled in Hill Side Academy.

By signing this form you understand that the classes are being held online and in the future may be held in a classroom setting. By signing this letter, you understand that even with the best care and intentions, if injury or harm should befall your child, we (teachers and management) will not be legally responsible. You also agree that if your child is showing Covid like symptoms, you will not send him to classes.

Parent Signature

**Office Use only**  
Standard Assigned:  
Class/Batch:

Join Date:

Name of Office staff