 **BADU ROAD, MADHYAMGRAM, KOLKATA-700129**

**Registration Form**

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| --- | --- |
| Name of Student: |  |
| Name of Guardian: |  |
| Name of School: |  |
| X+2 (Appeared/Passed):  |  |
| Name of BOARD:  |  |
| Address (Residence):  |  |
| Phone No:  |  |
| E-mail ID:  |  |