

SUMMER VACATION HOBBY CAMPS-2024
NATIONAL SCIENCE CENTRE
(NATIONAL COUNCIL OF SCIENCE MUSEUMS)
MINISTRY OF CULTURE, GOVERNMENT OF INDIA
NEAR GATE NO.4, PRAGATI MAIDAN
NEW DELHI - 110001

REGISTRATION FORM

NAME OF THE DISCIPLINE/COURSE : _____

PERIOD OF CAMP : _____ **TIME:-** _____

NAME OF THE STUDENT (in Capital Letters) : _____ **CLASS of STUDY** _____

SCHOOL'S NAME : _____

SCHOOL ADDRESS : _____

NAME OF THE FATHER : _____ **Occupation** _____

NAME OF THE MOTHER : _____ **Occupation** _____

RESIDENCE ADDRESS : _____

PHONE NO. : _____ **MOBILE NO.** _____

E-MAIL ADDRESS : _____

We hereby declare that the information given above is true to the best of my knowledge and belief.

Signature of Student

Signature of Parents

FOR OFFICE USE ONLY

The enrolment fee may be deposited with the cashier/ticket counter. Admission of _____
in _____ for the camp duration _____ is recommended.

His/Her registration No. is _____.

E.O.

Receipt No./Ticket No. _____ Amount received _____ Dated _____

Signature of Cashier /Ticket Counter staff

**Note: - 1. Issue or submission of the form is not a confirmation of enrollment for the camp. Enrollment is subject to availability of seats booked on first-come-first-serve basis.
2. After submission of requisite fee, the filled up form need to be surrendered at cash counter. Fee receipt should be kept safely and to be produced on the first day of the camp to the course coordinator.**