

Sunbeam School Lahartara, Varanasi CBSE National Badminton Championship 2019 Participation Confirmation



(Please mail by 20th November 2019) Email: lht@sunbeamschools.com

Name of the School			
Address			
Zone			
Mobile no.	API /		
Email. Id:	KA		
	TEAM DETAILS		
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	Name	Unique ID	DOB
U-19 Boys			
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U-19 Girls	API DE		
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Name of Manager			i i i
		411 V	Photo
Mobile no.			3
Name of Manager			
			Photo
Mobile no.		-	

Certificate

I hereby certify that above details of the participants are true and verified as per our school record and found correct. The team Manager and Coach whose names appear above are persons appointed by the undersigned.

Principal's Sign.

School Seal

BOARDING AND LODGING DETAILS

(Please mail by 20th November 2019) Email: lht@sunbeamschools.com

	School name:			
	Name & Mobile No. of Manager			
	Conformation of accommodation	(including Escorts): Yes	No No	
	No. of Boys	No. of Girls	Total contingent of	izo
	No of escorts (M)	No of escorts (F)	Total contingent s	1126
	If not staying in campus, name or hotel with complete address:	fthe		
				ППП
Plea	se take a note that we are not ab	le to provide to and fro t	ransportation for the team	ns staying in the hotel.
	Principal's Sign.			School Seal