



ENQUIRY FORM

Academic Year: _____ Date of Enquiry: _____

Child Name: _____

Date of Birth: _____ Gender: _____ Religion: _____

Admission sought in: ☐ Infant & Toddler ☐ Playgroup ☐ Nursery ☐ JR KG ☐ SR KG ☐ Day care

☐ After School ^{Timings} _____ ☐ Activity Classes _____ ☐ Tuitions Class _____ Board _____

School _____ School Timings _____

Timings: _____ Frequency: _____

Father's Name: _____

Mobile No.: _____ E-mail id: _____

Occupation _____ Designation _____

Company Name _____

Mother's Name: _____

Mobile No.: _____ E-mail id: _____

Occupation _____ Designation _____

Company Name _____

Communication Address _____

Transportation: ☐ Yes ☐ No If Yes: ☐ One Way ☐ Two Way

How do you get to know about "ORANGEE"

☐ Word of Mouth ☐ Website ☐ Pamphlets ☐ Referral Name : _____ ☐ Others _____

Follow Up _____



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