

PARENTAL CONSENT

FOR WARD TO ATTEND SCHOOL

1. I, Mr / Mrs (Rank) _____ hereby give consent for my ward Master /Miss _____ to attend physical school at APS Binnaguri. wef _____.

2. I, hereby also declare that I will ensure all individual COVID safety measures as directed by the school are followed by individual / my ward.

Signature
(Rank & Name of Parent)

Location :

Date :