



# CHILD ADVENTURE WORLD

## CREATIVE CHILDREN'S WORLD

181/15, Pragati, Sector No. 1, Charkop, Kandivali (W), Mumbai-400 067.

Phone : (022) 2869 0859 / 93 2121 8484 / 98692 67179

E-mail : summercamp@childadventure.com summercamp123@ g mail.com

www.childadventure.com

## SUMMER CAMP / TOUR

### APPLICATION FORM

(Please fill up in BLOCK Letters)

Destination : \_\_\_\_\_ From Date : \_\_\_/\_\_\_/\_\_\_ To Date: \_\_\_/\_\_\_/\_\_\_

Name \_\_\_\_\_  
(Name) (Mother's Name) (Father's Name) (Surname)

Address \_\_\_\_\_

Pin code : \_\_\_\_\_

Tel : \_\_\_\_\_ Mobile : \_\_\_\_\_

E-mail ID : \_\_\_\_\_

Date of Birth \_\_\_/\_\_\_/\_\_\_ Age \_\_\_\_\_ Yrs. • Gender : Male / Female • Native Place : \_\_\_\_\_

Food : Veg. / Jain • Bus Pick - Up & Drop At : \_\_\_\_\_

How do you come to know about the Summer Camp : *News Papers/Patrika/Friend/E-mail/SMS/Other*

Have you attended this kind of program previously? If yes, when & Where ? \_\_\_\_\_

### PARENT'S DECLARATION

To,  
The Organizer,  
Child Adventure World / Creative Children's World, Mumbai.  
Dear Sir,  
I, Father / Mother / Guardian of \_\_\_\_\_

confirm to having permitted him/her to attend the CAMP/TOUR to be held at \_\_\_\_\_  
from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ on my responsibility. He/She have read and agree to abide by  
the Rules & Regulations for the camp & He/She will be fully responsible for all the events during the Camp.

Yours Truly,

Date:- \_\_\_\_\_

\_\_\_\_\_  
Signature of the parent/Guardian

### FOR OFFICE USE ONLY

Amount received : Rs.

on Date :

Receipt No.



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No. \_\_\_\_\_

**Receipt**

Date : \_\_\_\_\_

Received with Thanks from \_\_\_\_\_

Cash sum of Rs. \_\_\_\_\_ only for

contribution towards expencies of camp / tour.

Held at \_\_\_\_\_ Batch No. \_\_\_\_\_

For CHILD ADVENTURE WORLD

From Date : \_\_\_\_\_ To Date : \_\_\_\_\_

**NOTE : Please Bring this receipt when reporting at camp.**