



Delegate Form For Shishyans(Classes IX - XII)

- (To be submitted by JULY 25, 2018)

Delegation To ILMUNC INDIA ,BENGALURU, 22-25 NOV. 2018

1. Name : _____
2. Class : _____
3. Date of Birth : _____
4. Father's Name : _____
5. Mobile No.: _____
Email Id : _____
6. Mother's Name : _____
Mobile No.: _____
Email Id : _____
7. Email Id of The Delegate : _____
8. Address : _____
9. Bus Stop And Bus No.: _____
Blood Group : _____
10. Allergies (If Any) : _____
11. Family Doctor's Name: _____
And Contact Number: _____
12. 14. Meal Preference : _____ Veg/ Non Veg:
13. 15. Prior MUN Experience: _____

CONSENT FORM

I _____ parent of _____, Class _____, give my consent for my ward's participation as a delegate in ILMUNC-INDIA 2018 organised by University Of Pennsylvania in collaboration with MunCafe to be held from Nov 22-Nov 25, 2018 at Sheraton Grand,Bengaluru. I am enclosing a cheque of ₹36,000 (Thirty six thousand only) towards Accommodation, Registration and Transportation dated -----, in favour of The Shishukunj International School, Indore.

Name: _____ Signature: _____

Date : _____