

**World Scholar’s Cup | East India Round**

**18th & 19th October, 2016 | Registration Form**

|  |  |
| --- | --- |
| School Name: |  |
| School Address, Website, Email and Phone: |  |
| Contact person: |  |
| Contact person’s designation: |  |
| Contact person’s mobile: |  |
| Contact person’s email: |  |
| Independent or School delegation: |  |

**Fee Information**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Fee** | | |  |  |  |
| **INR** | **$** | **Euro** | **No. of Participants** | **Subtotal** | **Total** |
| **Registration fee**  Per student (Including Conference Kit & Meals) | 2200/- |  |  |  |  |  |
| **Accomodation Fee**  **Type 1: -** Per person per day (on triple/quadruple sharing basis inclusive of breakfast and dinner) | 1200/- |  |  |  |  |  |
| **Type 2: -** School Guest House per person per day (on multiple sharing basis inclusive of breakfast and dinner) | 600/- |  |  |  |  |  |
| **Note:-**  1. Check in and check out would be at 12 noon.  2. There are limited host families available for International Students. Kindly let us know at the earliest |  |  |  |  |  |  |
|  |  |  |  |  | **Net Total** |  |

**Student Details**(Students born before 1st July, 2002 will compete in the senior division. Students born after 1st July, 2002 will compete in Junior division)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Division (Jr. 10-14 yrs, Sr. 15+ yrs)** | **First  Name** | **Family Name** | **Email** | **Date of Birth (DD/MM/YYYY)** | **Male/ Female** |
| **Team 1** |  |  |  |  |  |  |
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|  |  |  |  |  |  |
| **Team 2** |  |  |  |  |  |  |
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|  |  |  |  |  |  |
| **Team 3** |  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Team 4** |  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Team 5** |  |  |  |  |  |  |
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**Note: Please use copy and paste to extend the above section of this form if you have additional teams.**

**Adult Registration Information**

Delegation-Attached Adjudicators (DAAs)

Please designate one adult for every three teams in your delegation to attend adjudicator training. They may be asked to judge debates**.**

|  |  |  |  |
| --- | --- | --- | --- |
| Number of Teams |  | Number of DAAs: |  |
| Name/s of DAA/ faculty escort: | 1. | 2. | 3. |

**Special Needs**

|  |  |
| --- | --- |
| Please describe any food allergies and/or dietary preferences below. | Please describe any other special needs (e.g wheelchair accessibility) below |

**Payment Options**

|  |  |
| --- | --- |
| **Online Transfer / NEFT** | **Cheque / Demand Draft** |
| Kindly add the transfer of funds charges to the registration fee.  ***Bank Details: -***  **Bank** : -HDFC Bank Ltd.  **A/C No** : -50100022900032  **Branch**: - Raja Bazar, Patna - 800014  **IFSC Code: - HDFC0001649**  Please email the transaction number for confirmation of payment | Cheque/DD will be acceptable in the name of “Radiant International School” payable at Patna.  Dated\_\_\_\_\_\_\_\_\_\_\_\_ Cheque/D.D No.\_\_\_\_\_\_\_\_\_\_\_\_  Amount \_\_\_\_\_\_\_\_\_\_\_\_  Send Cheque/DD No. to : Col. Prem Prakash, Principal  Radiant International School, Cantt. Road, Khagaul, Patna  Please superscribe the envelope:  ”The World Scholar’s Cup” |

Registration Fee is Non-Refundable. However change of participants is permissible till ……………….

**Deadline for Registration: 10th October, 2016**

**Please visit** [**www.radiantpatna.com**](http://www.radiantpatna.com) **to register and** [**www.scholarscup.org**](http://www.scholarscup.org) **for complete details about the tournament**

**Email this form complete in all respects to confirm registrations to the address below: -**

[**wsc.indirapuram@gmail.com**](mailto:wsc.indirapuram@gmail.com)

**For all queries contact**:

Phone: +91-9431078555 / +91-9560994649