



Abu Dhabi Sakthi Theatres

*Presents
In association
with*



Our International



Reg No	
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REGISTRATION FORM

1	Name of Participant	
2	Age & Date of Birth	
3	Class & School	
4	Name of Parent	
5	Contact Number	
6	E-mail address	

7. Age Group (Please tick to choose)

Group	Age	Code	Choose	Remarks
A	6 to 9	KD		
B	9 to 12	JR		
C	12 to 15	SR		

Remarks

- Age of the participants will be considered as on 01 July 2010. Please attach Passport copy to verify the date of Birth
- A written pre-qualification round will be held for all Participants. Selected Participants from the pre-qualification round of each age group will be qualified for Live Quiz Contest, which will be held on Stage.
- Registration forms to be emailed to **rzechariah@gmail.com**

Signature of Participant