

**Pro forma letter for sending Consent of Participation to the Organizing School
(On School Letter Head, to be sent by 08 September 2024)**

Ref: _____

Date: _____

To
The Principal
South Point School, Guwahati
Guwahati-781018(Assam)

Subject: Consent of Participation- CBSE CLUSTER-I ATHLETICS MEET 2024-25

Dear Sir,

This is to confirm that our school would be participating in CBSE CLUSTER-I ATHLETICS MEET 2024-25 to be held from 12th to 14th Sep 2024 being organized by your school.

We shall abide by the rules and regulations prescribed by the CBSE for implementing the "Competitive Sports Programme"

Total No. of Participants:

	Under 14	Under 17	Under 19
GIRLS			
BOYS			

Whether availing boarding & lodging facility: _____ (Yes/No)

A cash amount of Rs. 1,000/- (Rupees One Thousand only), being refundable Precautionary Deposit, is being paid in advance/ will be paid at the time reporting to the school.

Thanking You.

Yours faithfully

(PRINCIPAL)

- Encl: 1. Team Details (Annexure – III)
2. Photo Identity Card of Participants, Coach and Manager (Annexure – II).
3. Group Photograph of Participating team with Principal, Coach and Team Manager (Ann – I).

CBSE Cluster I ATHLETICS 2024-2025

Under 14 to Under 19 years- Boys and Girls

(12th to 14th September 2024)

Hosted by : South Point School, Guwahati-781 018

ANNEXURE – I

(To be submitted on arrival at the registration counter)

Certificate from Principal

Name of the School :

TEAM PHOTOGRAPH WITH PRINCIPAL AND COACH MANAGER



MANAGER / COACH

SCHOOL SEAL

PRINCIPAL

CBSE Cluster I ATHLETICS 2024-2025

Under 14 to Under 19 years- Boys and Girls

(12th to 14th September 2024)

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ANNEXURE – II

IDENTITY CARD (FOR EVERY PARTICIPANT)

(To be submitted on arrival at the registration counter)

Affix recent
passport size
photo in school
uniform

Name of the School :

CBSE Unique ID No. :

Participant's Name :

Mother's Name :

Father's Name :

Date of Birth :

(copy of Birth Certificate to be submitted)

Class of Study :

Admission No :

Board Registration No. :

(Class-IX & above)

Signature of Participant

Signature of Principal with stamp

CBSE Cluster I ATHLETICS 2024-2025

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ANNEXURE – III TEAM DETAILS PROFORMA

1. Name & Address of the School : _____
2. Name of the Principal : _____
3. Phone No. (With STD Code) : _____
4. Email id : _____
5. No. of Managers/Coaches: Male _____ Female _____
6. No. of Participants: Boys _____ Girls _____
7. Name of team Manager/Coach & Contact no. _____

8. Accommodation facility is required : [Yes / No]
9. Pick up facility is required : [Yes / No]
10. Arrival/ Departure Details :
Arrival at _____ by train Bus on Date _____ Time _____
Departure at _____ by train Bus on date _____ Time _____
Name of the Train/Bus _____

Signature of Principal with stamp

CBSE Cluster I ATHLETICS 2024-2025

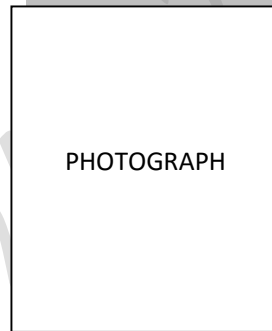
Under 14 to Under 19 years- Boys and Girls

(12th to 14th September 2024)

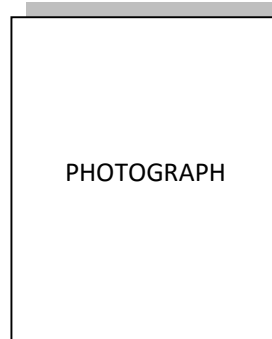
Hosted by : South Point School, Guwahati-781 018

COACH MANAGER ACCOMPANYING THE TEAM

1. Name : _____
Designation : _____



2. Name : _____
Designation : _____



Signature of Principal with stamp