

#### BAL BHARATI PUBLIC SCHOOL, PITAMPURA, DELHI - 110034

#### **CIRCULAR**

Dear Parents, April 18, 2018

The school in its endeavor to bring the best in the field of education to its students is organising a 1N/2D educational trip for the students of class VI to X to ASTROPORT Sariska in collaboration with Astro Tourism India Pvt. Ltd. from 27th April to 28th April, 2018 (for Girls only). As there are limited seats the students will be enrolled on first come first serve basis. If interested, kindly fill the consent slip given below and send it alognwith a cheque of `4,700/- drawn in favour of Bal Bharati Public School, Pitampura latest by 23rd April, 2018. The students may submit the cheque with Ms. Anjani Sareen (Chemistry Department).

Astroport is the first Astronomy-themed resort and activity centre of India and South Asia. The facility, one of its kind in the world has been developed to provide a great sky viewing and research experience to the budding astronomers within us. It is at a location which offers the darkest sky possible in India.

Astroport is located in the serene and lush environment of Sariska Tiger Reserve, in the lap of Aravali hills overlooked by the historical Tehla Fort. It is just a stone throw away from Sariska National Park and conveniently connected to Agra, Delhi and Jaipur. It is just 33 Kms from Bhangarh a mysterious archaeological site. The site is placed well away from pollution, of light, air and sound. The site is situated at the cornerstone of a foothill and a river channel providing a wonderful exposure to wildlife, environment and beautiful sky.

Thanks & Regards,

(Ms. Meenu Goswami) Principal

BS CIR'18

### **CONSENT FORM (Class-VI to X Girls)**

I would like my ward to join School's tour to **ASTROPORT Sariska** from **27**<sup>th</sup> **April to 28**<sup>th</sup> **April, 2018** and enclose herewith the cost of the tour **(Rs. 4700/-)**. I appreciate your assurance for precautions for the safety of my ward. I indemnify the school and Astro Tourism India Pvt. Ltd. against any mishap or accident resulting in any harm that may be caused to my ward during the actual conduct of the tour.

| Name of Student              | Class & Sec     | Date of Birth |  |
|------------------------------|-----------------|---------------|--|
| Admn. No Meal Preferenc      | e (Veg/Non-Veg) |               |  |
| Any Medication/allergy       |                 |               |  |
| Cheque NumberBank            | Name            |               |  |
| Father's Name:               | Contact No. :   | Sign          |  |
| Mother's Name:               | Contact No. :   | Sign          |  |
| Email id (Parents & Student) |                 | Date:         |  |



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| Father's Name:         | Contact No. :        | Sign          |  |
| Mother's Name:         | Contact No. :        | Sign.         |  |

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

Email id (Parents & Student)