

INSTITUTE OF PERFORMING ARTS

HEAD OFFICE. Building no.3611,SUSHANT LOK PH III,SECTOR 57, GURGAON,
HARYANA ,122003

STUDENT'S NAME:
DATE OF BIRTH:
ADDRESS:
CITY:STATE:..... ZIP CODE:
PARENT'S NAME:..... CELLULAR
EMERGENCY CONTACT:.....
EMAIL ID:.....
HAVE YOU TAKEN CLASSES BEFORE? []YES []NO

REFERRED BY:.....
COURSE NAME:..... DURATION:.....
ANY MEDICAL PROBLEM:.....
ID NO:.....ISSUED BY INSTITUTE

**AUTHORISED
SIGNATORY**

STUDENT/GUARDIAN'S SIGNATURE:.....