



WISDOM PUBLIC SCHOOL

A unit of LORD PARSHWANATH GYAN FOUNDATION

Kokjhar, (Near NATCO Pharma), P.O: - Mirza, P. S: - Palashbari, Kamrup(R), Assam, Pin - 781125

Phone No.: - 03623-291110, Website: - <https://wisdompublicschools.com>

Email: - wisdompublicschool2015@gmail.com

CBSE Affiliation Number: 230320

ANNEXURE "A"

Performa of letter for sending consent of Participation to the Organizing School **(On School Letter head)**

To
The Principal
Organizing School
CBSE Cluster/Zone/National
_____ Championship/Meet

Dear Madam/Sir

Subject: Consent of participation - CBSE Cluster / Zone / National
_____ Championship / Meet _____ .

This is to confirm that our school would be participating in the CBSE Cluster/Zone/National
_____ Championship/Meet _____ Being organized by your
school.

We shall be forwarding you the detailed entry Performa so as to reach you at least a week
before the commencement of the competition.

Thanking you

Yours faithfully

Principal



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CBSE CLUSTER-1 U-14, U-17 & U-19 KHO-KHO (BOYS) TOURNAMENT 2026-27

1st August to 3rd August, 2026

Organized by:

**Wisdom Public School, Near NATCO Pharma, PO- Mirza, PS- Palashbari, Dist.-Kamrup, State -Assam,
Pin- 781125**

ANNEXURE "B"

1. NAME & ADDRESS OF SCHOOL: _____

2. NAME OF PRINCIPAL: _____
3. PRINCIPALS CONTACT NUMBER: _____
4. NAME OF TEAM MANAGER: _____
5. CONTACT NO OF TEAM MANAGER: _____
6. NAME OF COACH: _____
7. CONTACT NO OF COACH: _____
8. ACCOMODATION (WHETHER REQUIRED): _____
9. TRANSPORTATION (WHETHER REQUIRED): _____

If accommodation / Transport opted then please fill up the following details:

FOR TRANSPORTATION TO CAMPUS:

1. Date and Time of Arrival of team at pickup destination:
2. Place of Arrival / Pickup:
3. Total No of People Arriving:
4. Name of Train / Flight/ Bus by which arriving:
5. Time and date of Departure (if Certain):
6. Place of dropping:
7. Name of Train / Flight/ Bus by which departing:

FOR ACCOMODATION:

1. Total Number of People:
2. Time and date of Departure (if Certain):

SIGNATURE OF PRINCIPAL

PLEASE READ THE FOLLOWING:

- 1) Scanned copy of ANNEXURE- "A" & "B" is to be mailed to us at examinationcellwps@gmail.com cc to principal.wpsmirza@gmail.com on or before 20th July, 2026 along with the Confirmation letter.
- 2) Hard Copy of the same is to be submitted to us at the registration counter on arrival.
- 3) The school must submit all the particulars in a file.
- 4) The school must carry the Admit/IDs Provided by CBSE Game, School ID, Birth Certificate and a Government Id for each candidate and photocopies of the same is to be submitted after verifying the originals.
- 5) All the schools should take part in the opening ceremony to be held at 09.00 A.M IST on 1st August, 2026 at WISDOM PUBLIC SCHOOL CAMPUS and should arrive accordingly.
- 6) The registration for local teams will be on the 31st July, 2026 from morning 8.30 am to 4.30 pm with all documents (players not required).
- 7) For any kind of assistance, please feel free to call us:

i. Principal:

Name: Neety Choudhury Sharma
Contact Number: 84748-76336

ii. Sports In-charge:

Name: Kapil Kr Agarwal
Contact Number: 98641-27456

iii. Food In-Charge:

Name: Rajat Jain
Contact Number: 84728-85367

iv. Accommodation In-Charge:

Name: Om Prakash Mirdha
Contact Number: 97833-71169

v. Transport In-Charge:

Name: Dharmendra Kalita
Contact Number: 91274-83157



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ANNEXURE "C"

1. NAME OF SCHOOL: _____
2. ADDRESS OF THE SCHOOL: _____
3. SCHOOL MAIL ID: _____
4. OFFICIAL CONTACT NO OF THE SCHOOL: _____

TEAM PHOTOGRAPH WITH PRINCIPAL, COACH AND MANAGER

COACH/MANAGER

SCHOOL SEAL

PRINCIPAL

(To be submitted at the registration counter)



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ANNEXURE "D"

Performa for sending Detailed Entry for team events

Name of the School with address: **Wisdom Public School, Near NATCO Pharma, Mirza**

Discipline: KHO-KHO

Age Category (Boys): UNDER 14, 17 & 19

S. No.	Name of the Student	Class	Admission No.	Date Of Birth	CBSE Registration No. if the student is in IX, X, XI or XII	Photograph attested by the principal
1.						
2.						
3.						

(To be filled for all the students included in the team)

Officials accompanying the team (Maximum two)

1.	Name of the Coach		Photograph attested by the principal
2.	Name of the Team Manager		Photograph attested by the principal

Certified that the detailed mentioned above are true.

Principal



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ANNEXURE "E"

UNDERTAKING

Name of Player:

UID No:

SCHOOL WITH ADDRESS:

1. In case of any injury in the ordinary course of the game the organizing school shall not be held liable.
2. The player shall fully comply with the behavioral code of conduct. In case of violation action may be taken.
3. The player shall not inflict harm on any school property. In case of violation fine may be imposed.

SIGNATURE OF PARENT / GUARDIAN

PRINCIPAL

1) To be submitted at the time of registration on arrival, each for each candidate.