

BIRLA SCHOOL, PILANI

Name of the Student	
Account No. / Scholar no. / BSPST512.....
Date and Year of Admission	
Name of the Father in Bank A/c (IN BLOCK LETTERS)	
Name of the Mother in Bank A/c (IN BLOCK LETTERS)	
Complete Postal Address	
Contact Number	
Email ID	
Bank A/c No. where transfer required	
IFSC	
Bank Branch Address	

SIGNATURE OF THE PARENT

Kindly provide the scanned copy of your cancelled cheque for Name and Account Number. After that no request can be entertained.

KINDLY SEND THIS FILLED FORM AND COPY OF CANCELLED CHEQUE AT

Office@birlaschoolpilani.edu.in