

Cir./2025-26/7

October 14, 2025

LAKSHMIPAT SINGHANIA ACADEMY INTERNATIONAL
12-B ALIPORE ROAD, KOLKATA 700 027

Dear Parents,

We propose to conduct a picnic to **‘SHIV SHAKTI GARDEN’**, Bakrahat Road, Raypur for **Class VIII** students of our school on **Monday, October 27th, 2025**. Details are as under:

Reporting time to school : 07:45 a.m.

Dispersal from school : 05:00 p.m.

TOTAL TOUR PRICE : Rs.1250/ per head to be paid by cheque in favour of ‘Lakshmipat Singhania Academy’ (inclusive of AC transportation, breakfast, lunch and taxes.)

Payment should be made to the HRT latest by
Friday, October 24th, 2025.

Meena Kak

HoS

CONSENT FORM

HoS

Lakshmipat Singhania Academy Kolkata
700 027

Dear Madam,

I wish to send my ward to the above mentioned visit to **‘SHIV SHAKTI GARDEN’**. The payment of Rs. 1250/- is paid via cheque.

Name: _____ Admn.No. _____

Address: _____

Class: _____ Sec.: _____ Gender: _____ Blood Group _____ Tel. No: _____

Name of Parent / Guardian: _____

Cheque No. _____ Drawn on: _____ Dated _____

Signature of Parents with date _____

Note: Please mention Name of student and Admn.No. at the back of the cheque