



Delhi Public School Guwahati

"Under the aegis of the Delhi Public School Society, Delhi"

RefNo: DPSG/Cir/15-16/Admn: 107

For Classes VI to VIII

Date: 30.10.15

Dear Parent,
Greetings!


You will be glad to learn that like previous years, this year too the school is organising a 3-Day **Basic Rock Climbing cum Trekking Course** in the vicinity of Guwahati from 11th to 13th December 2015. In this course the students will be equipped and trained on basic rock climbing, rappelling, trekking, etc. We believe that such activities instill in children aspects like leadership, decision making, punctuality, cooperation, honesty and provides a positive, creative and happy outlet for the abundant energy, enthusiasm and imagination of young people.

Details of the programme may be read as under:

- Course fee: **NON REFUNDABLE** amount of Rs. 700/- (Rupee Seven Hundred only) per participant.
- Timing: Normal school hours; buses will ply on selected routes on 12th & 13th Dec 2015.
- Only students of classes VI to VIII who are medically fit are eligible for the course.
- The program is subject to minimum confirmation of 40 students and maximum limit is 75. Selection will be on first come first serve basis.
- Excess amount; if any will be refunded back from the school accounts department.
- Training shall be imparted by senior male and female mountaineers. However, separate male and female teachers will also be deputed from the school during the course.
- For details please feel free to contact Mr. Hemanta Bezbaruah at 09854035991 during any working day between 8 am – 4 pm.

Interested parents may kindly submit their consent along with the tour amount in the school accounts department on or before 25th November 2015.

With sincere regards,


PRINCIPAL



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CONSENT AND UNDERTAKING

I Mr. /Mrs. _____ hereby agree to send my ward Master/ Miss _____ Class _____ Sec _____ to participate in **Basic Rock Climbing cum Trekking Course** from 11th to 13th December 2015. I am also depositing an amount of Rs. 700/- by cash in the school accounts section. *I do understand the risk involved during the course. Under no circumstances shall I hold the school authorities responsible in case of any accident or unforeseen incident.*

Signature of the parent _____
Contact no. _____
E-mail: _____
School Bus Stoppage (if availing): _____

Date: _____