**REGISTRATION FORM – ELOCUTION COMPETITION**

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| **Sr.No.**  | **Name of the Participant**  | **STD**  | **Group** | **Name of the School** | **Language****(Tick any one)** |
| **A** | **B** | **English**  | **Hindi** | **Marathi**  |
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Name of the Teacher. In charge: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone no: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email id : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_