KAVI BHARATHI VIDYALAYA

Cir. No: G/2025-2026/094 *Date*: 06.11.2025

Dear Parent,

This is to inform that your ward has been selected to participate in the **CREOFEST '25** – Inter School Competition & Carnival. Please make note of the details given below.

Name of the Competition / Event	: **CREOFEST '25**
Venue	: Acharya Mahashraman Terapanth Jain Public School, Madhavaram, Chennai – 600 060.
Date & Time	: 08th November 2025 (Saturday)
Time of Reporting at school	: 7.00 a.m.
Expected Time of return to School	: 4.30 p.m.
Transport	: Private Transport.
Things to be brought	: Breakfast, Lunch (strictly vegetarian), Snacks and Sufficient Water.
Incharge Teachers	: Ms. Deepa – 90945 79726 Ms. Kalaiselvi – 95000 43888 Ms. Banupriya – 90250 56955

Principal's signature

……✂……

KAVI BHARATHI VIDYALAYA

CONSENT FORM

Student's name: …… *Class*: ……. *Sec*. …...….

I hereby agree to send my ward _____of Std _____ to participate in the **CREOFEST '25** to be held **at Acharya Mahashraman Terapanth Jain Public School,** Chennai - 60 on **08th November 2025** (Saturday). Though utmost care will be taken, the school shall not be held responsible for any untoward incident which might occur.

Mother's Signature *Father's Signature*