



INTSO
EDUCATION
Leading Olympiad in India

SCHOOL
REGISTRATION
FORM

Name of the School : _____
School Address : _____

Place : _____ District : _____
State : _____ Pin code: _____

School Phone Number : _____ Cell No. : _____
(with STD code)

E-mail : _____

Name of the Principal (Mr. / Mrs. / Ms.) : _____

Syllabus Followed : _____
(CBSE / ICSE / State Board)

Exam Class	1 MTSO Math	2 ATSO Aptitude	3 ETSO English	4 STSO Science	5 GTSO G.K.	GRAND TOTAL
3 rd		ATSO for 6th to 10th only				
4 th						
5 th						
6 th						
7 th						
8 th						
9 th						
10 th						
TOTAL						

Total No. of Exams : _____
D.D. Taken Amount : _____
D.D. No. : _____
D.D. is to be taken in favour of "INTSO EDUCATION" (Payable at Vijayawada)

Signature of the Principal
with School Seal

Call: +91 92489 227 77 | 0866 24363 77 | 0866 66665 99

TOLL FREE NO  **1800 425 1477**