

**Karnataka State CBSE Cluster VIII
Volleyball Tournament - 2018-19**

DETAILS OF BREAKFAST, LUNCH, DINNER REQUIRED

(To be filled and sent along with eligibility form)

SCHOOL NAME : _____

ADDRESS : _____

FILL IN THE REQUIRED NUMBERS OF PERSON FOR

	07/10/2018	08/10/2018	09/10/2018	10/10/2018
Breakfast				
Lunch				
Dinner				

Details of Team Members:

Managers : _____ (Male/Female)

Coaches : _____ (Male/Female)

No. of Participants : Boys _____ Girls: _____

Total No of Team Members : _____

Arrival Details:

(a) Arrival at Shikaripura Bus stand Date _____ Time _____

(b) Train Number : _____

(c) Name of the Train : _____

Departure Details:

(a) Departure from Shikaripura Bus stand Date _____ Time _____

(b) Train Number : _____

(c) Name of the Train : _____

Remarks if any _____

(Shivamogga To Shikaripura 5 minutes once Bus each 50/- Rs charge)

Seal & Signature of Principal