



SPELLING BEE REGISTRATION FORM

[This form must be completed and submitted to the District/ Provincial coordinator. Only **grades 4-6** learners from public, independent, special and registered home schools are eligible for registration]

Name of the Province:..... District:.....

Name of School												
Telephone number of the School		()										
Fax number of the School		()										\geq
Emis number of the School												
Postal Address of the school									1			
		Code										
Residential/ Physical Address of the school												
501001												
		Code if any										
Name of the Principal												
Cell-/Contact No. of the Principal												
E-Mail of the Principal							1					
Particulars of learners or a learner taking particulars												-
Surname	Nan	Name (S)				Gra	ade	Gender		Home Language		Date of Birth
1.												
2.												
3.												
4.												
NB: Write on separate page and attach to the form if space is not enough												
						SCHOOL STAMP						
Signature of the Principal:												

Date

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