



**TAGORE INTERNATIONAL SCHOOL  
EAST OF KAILASH, NEW DELHI**

TIS/CIR/59/24-25

**CIRCULAR  
Classes: III - V**

12 November 2024

"Textbooks offer knowledge, but travel offers wisdom, shaping minds and souls."

Dear Parents

A 03 days and 02 night trip is being organised to Sariska for the students of classes III,IV and V. The students will leave for Sariska on **Wednesday, 27 November 2024 at 05:30 am** and return to the school on **Friday, 29 November 2024 by 08:00 pm** (subject to traffic conditions).

**Sariska Tiger Reserve or Sariska National Park is one of the biggest and most renowned Tiger reserves in Northern India. The park is located in the Alwar district of Rajasthan, which is about 107 km from Jaipur.** The students will enjoy an Astronomy session, visit City Palace & Museum, Moosi Maharani Ki Chhatri, a wildlife safari and much more.

We look forward to your support and enthusiasm in making this trip a memorable learning experience for your child.

Parents interested in sending their wards may please fill in the consent form and submit the same along with the cheque/cash of ₹11,000/- in favour of "Tagore International School" towards the cost of the trip latest by Wednesday, 20 November 2024 at the school office.

**PLEASE NOTE THAT THE TRIP IS AN OPTIONAL VISIT AND NOT A MANDATORY VISIT.**

Warm regards

**(Deepali Sahi)  
HEADMISTRESS JR. SCHOOL**

TIS/CIR/59/24-25

**CONSENT FORM  
Classes: III - V**

12 November 2024

I, \_\_\_\_\_, mother/father/guardian of \_\_\_\_\_ of Class & Sec \_\_\_\_\_ permit my ward to go on the school's trip to **Sariska Tiger Reserve or Sariska National Park from Wednesday, 27 November 2024 at 05:30 am** and return to the school on **Friday, 29 November 2024**. I am sure that the school will take full care and all precautions to safeguard my ward. I, however, indemnify the school authorities from all responsibility in case of any natural or unavoidable mishap at the venue. My ward is physically fit and is able to participate in all structured activities.

\_\_\_\_\_  
Name of the Parent

\_\_\_\_\_  
Signature of the Parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Contact no. of Father

\_\_\_\_\_  
Contact no. of Mother