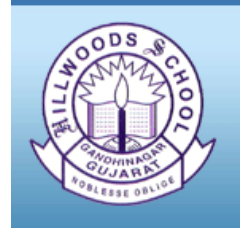




HILLWOODS SCHOOL, GANDHINAGAR

AFFILIATION NUMBER: 430041

HEALTH AND ACTIVITY CARD



GENERAL INFORMATION

Aadhar Card No. of the Student (optional) _____

Name: _____

Admission No: _____ Date of Birth: _____

M FT _____ Blood Group: _____

Vision: RE _____ LE _____

Ears: Left _____ Right _____

Mother's Name: _____

Blood Group _____ Aadhar No _____

Father's Name: _____

Blood Group _____ Aadhar No _____

Address _____

Phone No.: _____ Mobile: _____

CWSN, Specify: _____

Signature of Parent/Guardian

Date: _____