

Birla Public School, Doha - Qatar

Circular for Grades VI - XII

Dear Parent,

Subject: **Selection Trials for CBSE Cluster School Games 2025-26 (Kho-kho and skipping)**

The school is organizing **OPEN SELECTION TRIALS** for both **boys and girls to form school teams for Kho-kho and skipping** ahead of the CBSE Cluster School Games 2025-26. Interested students are requested to fill out the Google link before Thursday, 15 May 2025 and submit the registration form given below to the respective PE teachers (Main School).

Students who wish to participate are required to attend the selection trials on the specified dates and at the designated venues without fail to facilitate the smooth conduct of the trials.

Google Form Link: - <https://forms.gle/GoZiDYK1QYcBvdu18>

The selection trials will be held as per the following schedule after school hours (2:00 pm to 3:15 pm):

SR.NO	ACTIVITY	CATEGORY	DAY	DATE	CLASS	VENUE
1	KHO - KHO	Under-14, Under-17 Under-19	SUNDAY	18/05/2025	VI TO XII BOYS AND GIRLS	GREEN CARPET AREA
2	SKIPPING	Under-14, Under-19	MONDAY	19/05/2025	VI TO XII BOYS AND GIRLS	GREEN CARPET AREA

Note:

1. Students are requested to come prepared with appropriate sports attire and gear. Also, don't forget to bring a water bottle to stay hydrated during the trials.
2. Students enrolling for skipping selection trails should bring their own skipping rope.
3. School transport will be available after the selection trails for the students who use it.
4. Students may choose to participate in any game of their preference, as there are no restrictions regarding game selection.



Dr. Anand R. Nair
Principal

REGISTRATION FORM FOR CIRCULAR NO: BPS/EC/2025-26/25

Selection Trials for CBSE Cluster School Games 2025-26 (Kho-Kho and skipping)

Name of the student: - _____ Category: _____

Gender _____ Class / Div. _____ Ad. No: - _____ Bus No: - _____

Area: - _____

Declaration by the Parent

I _____, parent of _____, class _____ div _____ admission no _____ hereby allow my child to participate in the **Selection Trials for CBSE Cluster School Games 2025-26**. I shall ensure that my child will abide by all the rules and regulations of the school. I confirm that my ward does not have any allergies, medical conditions, health concerns, or physical limitations that would prevent him/her from safely participating in the activities.

I understand that the school will take all possible care and precautions to safeguard my ward. However, in case of any unforeseen incident, I will not hold the school responsible. By signing this form, I confirm that I have read, understood, and agreed to the above points and provide my consent for my ward to participate in the ward _____.

Sincerely,

Name and signature of the father _____

E- Mail _____ Contact Number _____

Name and signature of the mother: - _____

E- Mail _____ Contact Number _____