

***Annexure – B***

**C.B.S.E SOUTH ZONE SKATING CHAMPIONSHIP 2017**

(September 18<sup>th</sup> – 21<sup>st</sup> 2017)

**TRAVEL ITINERARY**

<b>S. NO</b>	<b>School Details</b>	
1.	Name of the School:	
2.	Affiliation Number	
3.	Postal Address:	
4.	E-Mail Id:	
<b>Team Details</b>		
5.	Name & Contact No. of the Team Manager or Coach	<b>1.</b>
		<b>2.</b>
		<b>Contact No:</b>
6.	Number of accompanying faculty	<b>Male:</b>
		<b>Female:</b>
7.	Accommodation Required (Yes/No)	
	If Yes No. of Participants	<b>Boys</b>
		<b>Girls</b>
		<b>Total:</b>
9.	<b><u>Arrival Details</u></b> Mode of Transport By: (Bus / Train)	<b>Arrival Date &amp; time</b> :  Service No (Bus) :  Train No / Name :

**Note:** We request you to give the accommodation details on or before September 4, 2017. On the spot request for the accommodation will not be entertained.

*Signature and Stamp of Principal*

*School seal*