

**OPTION CERTIFICATE**

I OPT FOR MAKING PAYMENT OF FEES IN ONE / TWO INSTALMENTS, IN  
RESPECT OF MY SON'S ROLL NO \_\_\_\_\_ NAME  
\_\_\_\_\_ CLASS \_\_\_\_\_ HOUSE \_\_\_\_\_ FOR  
THE ACADEMIC YEAR 2019-20.

DATE \_\_\_\_\_

SIGNATURE OF PARENT \_\_\_\_\_

NOTE : PLEASE STRIKE OUT WHICHEVER IS NOT APPLICABLE. FOR  
EXAMPLE, IF YOU OPT TO PAY FEES ETC IN TWO INSTALLMENTS, STRIKE  
OUT ONE.