



IDEAS CONTEST

Inspiring Digital Education and Academic Solutions

REGISTRATION FORM

INSTRUCTIONS & IMPORTANT DEADLINES:

- Please type all the columns in Microsoft Word.
- The last date of submitting registration form is **February 25, 2025** with normal fee, after this date the institutions can register by paying **20% extra fee** (per student) till **February 28, 2025**.
- The participation fee is **Rs. 1100/-** per participant, which can be paid through Bank Draft/Pay Order, drawn in favor of **NEXTGEN CREATION (PVT) LTD.**

OR

The fee can also be directly transferred to our A/C: **NEXTGEN CREATION (PRIVATE) LTD**,
NTN: **F514896**, A/C No: **0020139469720027** IBAN: **PK57 ABPA 0020 1394 6972 0027**,
Bank Name: **ALLIED BANK LIMITED**, Branch: **ISLAMIC BANKING BRANCH, BAHRIA TOWN, PHASE 8, RAWALPINDI.**

- The registration fee once paid is non-refundable and non-transferable.
The registration forms complete in all respects should be sent to the following Postal Address:

NEXTGEN CREATION (PRIVATE) LTD

**Office # 1 & 2, Ground Floor, Taj Plaza,
Mid Way Commercial Bahria Town Phase 7,
Rawalpindi - 46220, Pakistan
Phone: +92-300-8618614, +92-315-5557590**

- All particulars in the registration form must be filled as illustrated below. Variation from the format can result in the rejection of registration.

SR#	STUDENT'S NAME	FATHER'S NAME	GRADE
1	ABDULLAH HUSSAIN	HUSSAIN AHMED BHATTI	ONE



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SCHOOL INFORMATION

SCHOOL INFORMATION			
SCHOOL NAME:			
CAMPUS NAME:			
ADDRESS:		WHATSAPP MOBILE:	
CITY:		COUNTRY:	
EMAIL ADDRESS:			

OFFICIAL NAME OF THE INSTITUTION'S BANK ACCOUNT FOR HONORARIUM PAYMENTS

1. PRINCIPAL'S CONTACT DETAILS (FIRST CONTACT)

Full Name	
Cell No.	
Office Phone No.	
Email	

2. COORDINATOR'S CONTACT DETAILS (SECOND CONTACT)

The institution must appoint an official to coordinate and communicate in the principal's absence.

Full Name	
Cell No.	
Office Phone No.	
Email	

ACCOUNT TITLE FOR COORDINATOR'S CASH AWARD (if no. of students 150 or above)

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3. DETAILS OF REGISTERED STUDENTS (Class-wise summary of students to be registered):

LEVEL	CLASS		NO. OF STUDENTS (in figures)
PRE-NAVIGATOR (Age Group 6-7)	01	ONE	
	02	TWO	
NAVIGATOR (Age Group 8-9)	03	THREE	
	04	FOUR	
TRAILBLAZER (Age Group 10-11)	05	FIVE	
	06	SIX	
CHALLENGER (Age Group 12-13)	07	SEVEN	
	08	EIGHT	
EXPLORER (Age Group 14-18)	09	NINE	
	10	TEN	
	11	ELEVEN	
	12	TWELVE	
MASTERMIND (Age Group 19-24)	13	THIRTEEN	
	14	FOURTEEN	
	15	FIFTEEN	
	16	SIXTEEN	
		TOTAL NO. OF STUDENTS	

4. AFFIRMATION

3. I certify that I have enclosed Deposit Slip/Bank Draft/Pay Order in original bearing No: _____ dated: _____ amounting to Rs. (in figures) _____ as a registration fee for total number of _____ students as mentioned in above summary @ Rs. 1100 per student in favor of **NEXTGEN CREATION (PVT) LTD.**

Deposit Slip/Bank Draft/Pay Order in original
PLEASE ATTACH HERE

A/C Title: NEXTGEN CREATION (PVT) LTD NTN: F514896

A/C No: 0020139469720027

IBAN: PK57 ABPA 0020 1394 6972 0027

Bank Name: ISLAMIC BRANCH, BAHRIA TOWN, PHASE 8, RAWALPINDI

NextGen
Creation



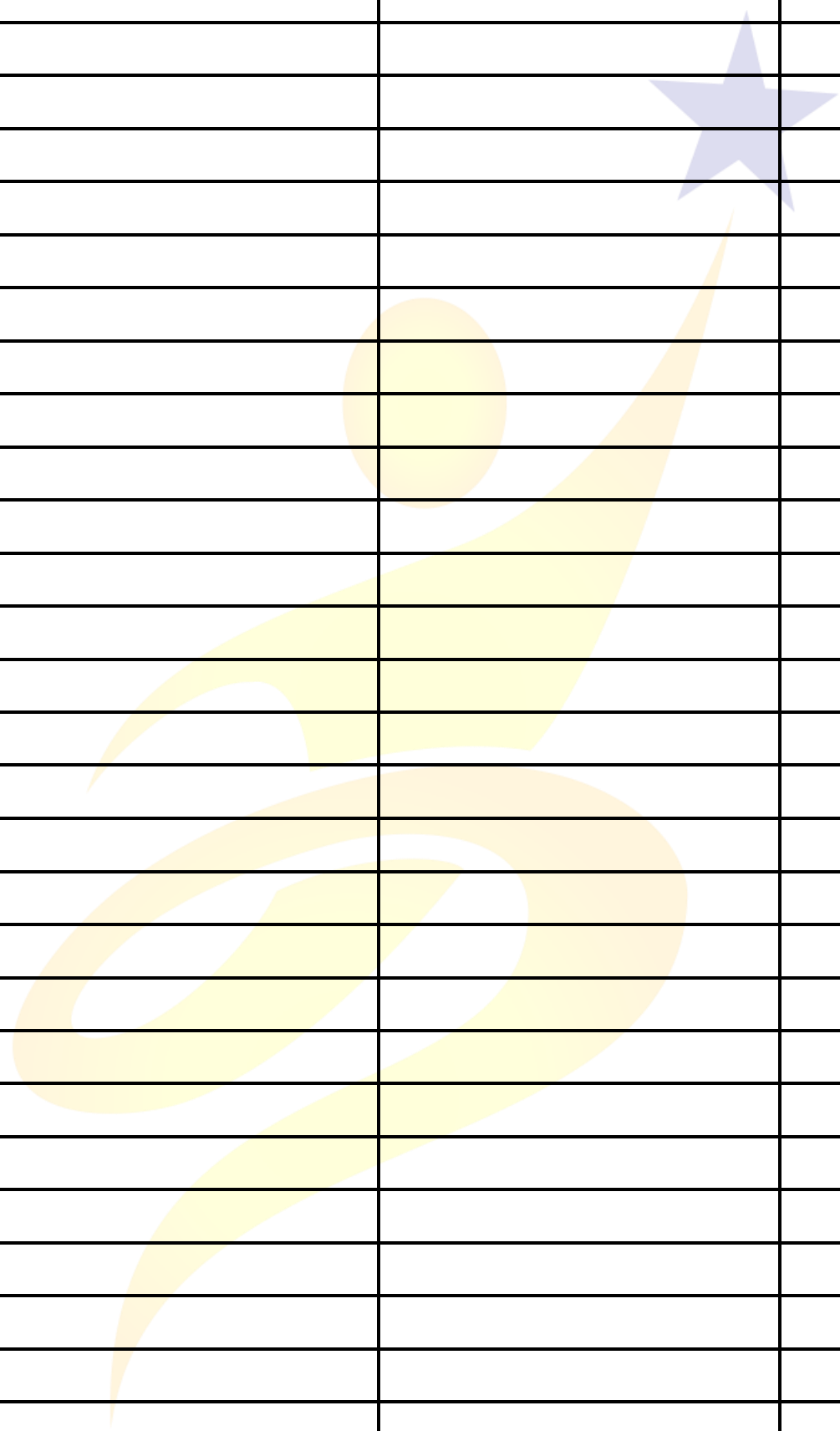
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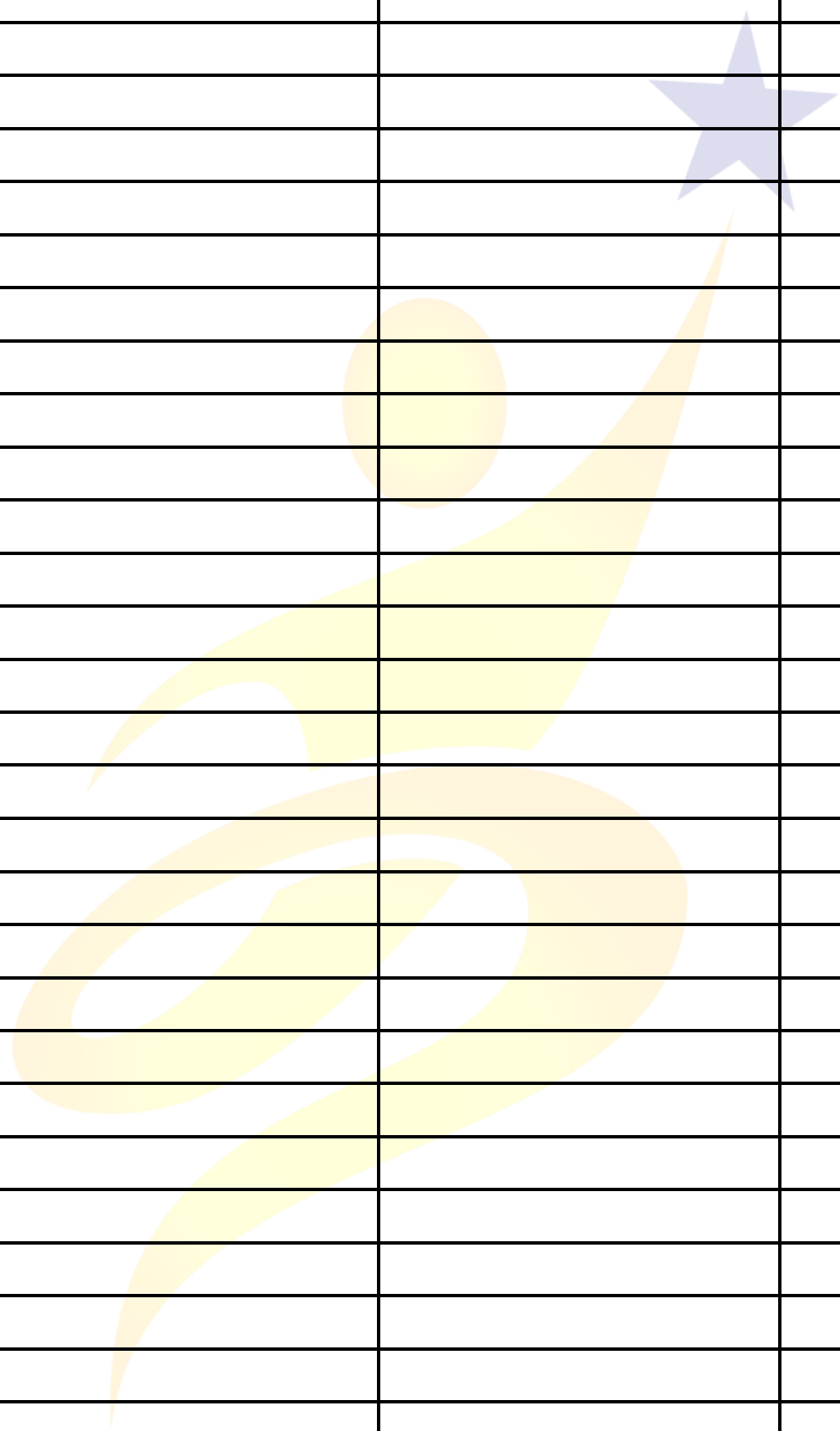
STUDENTS REGISTRATION SHEET

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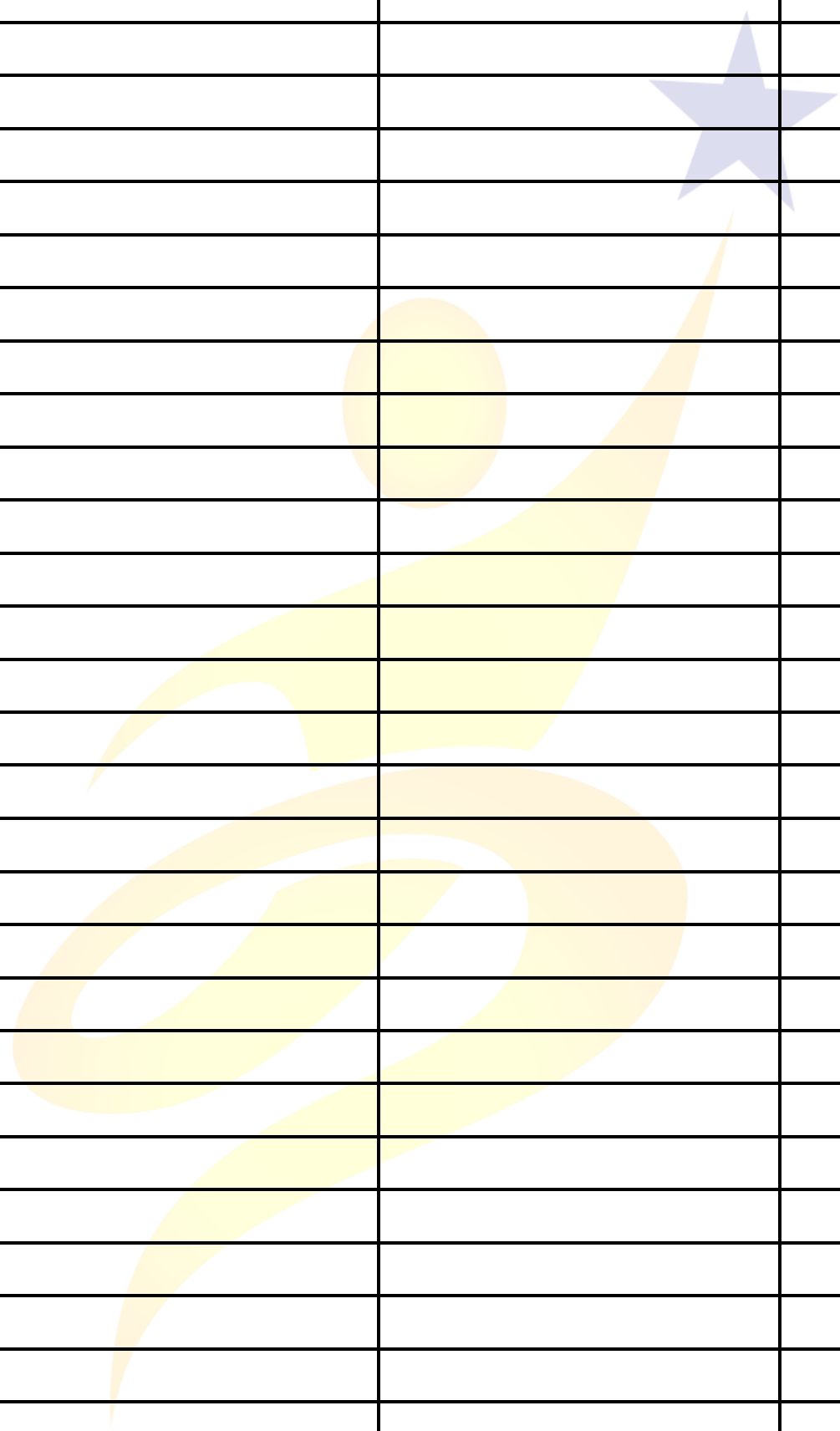
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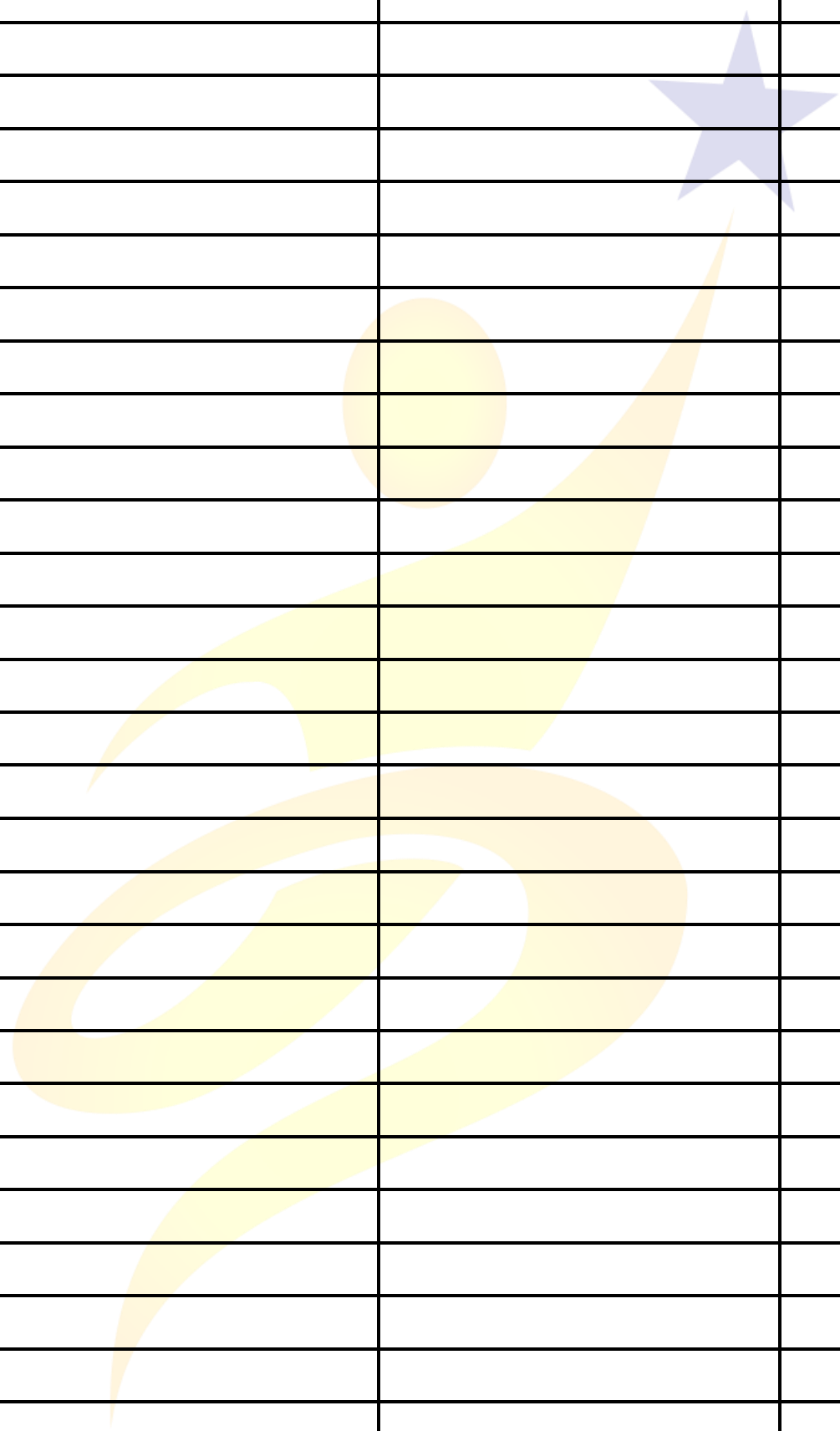
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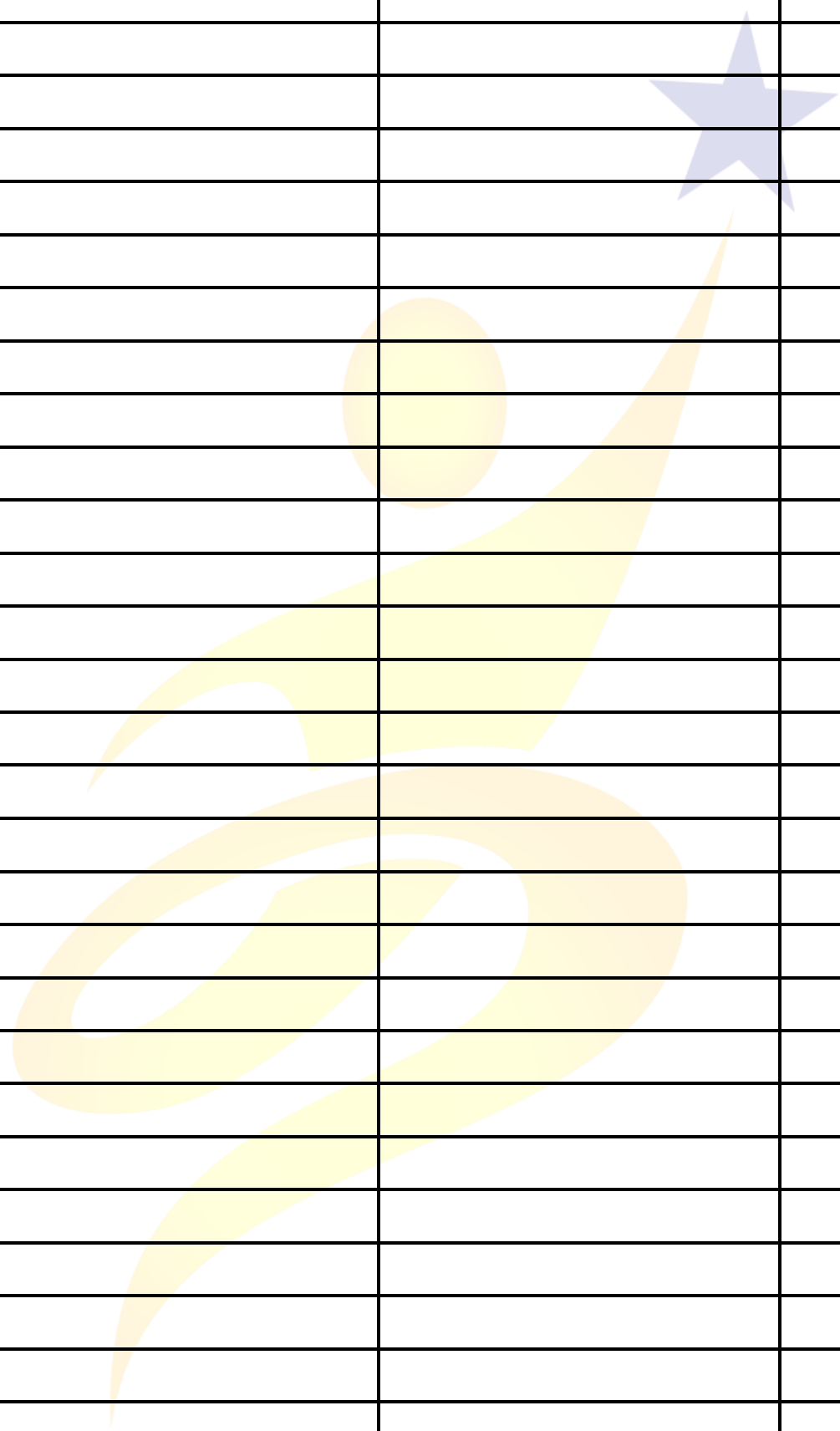
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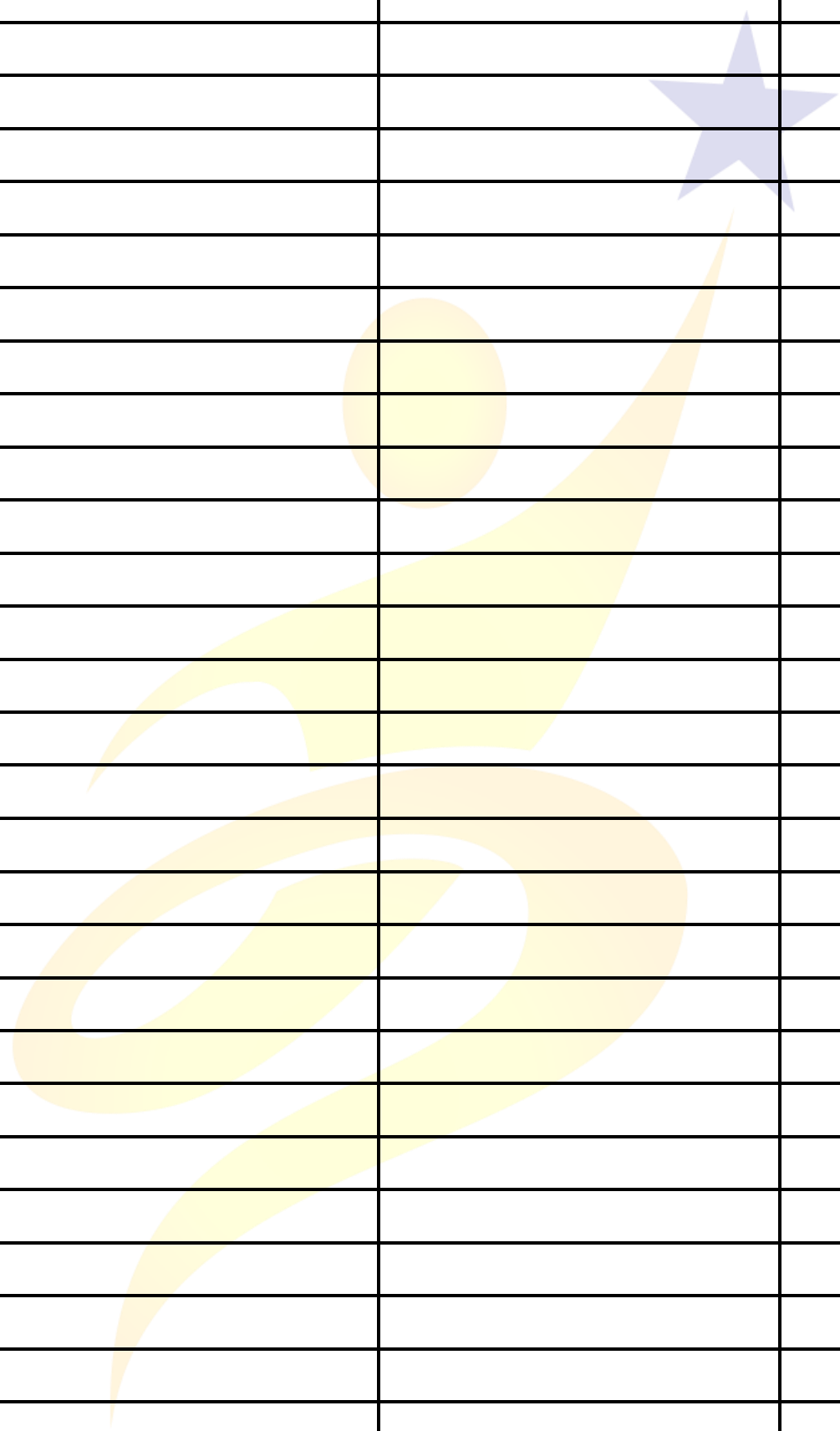
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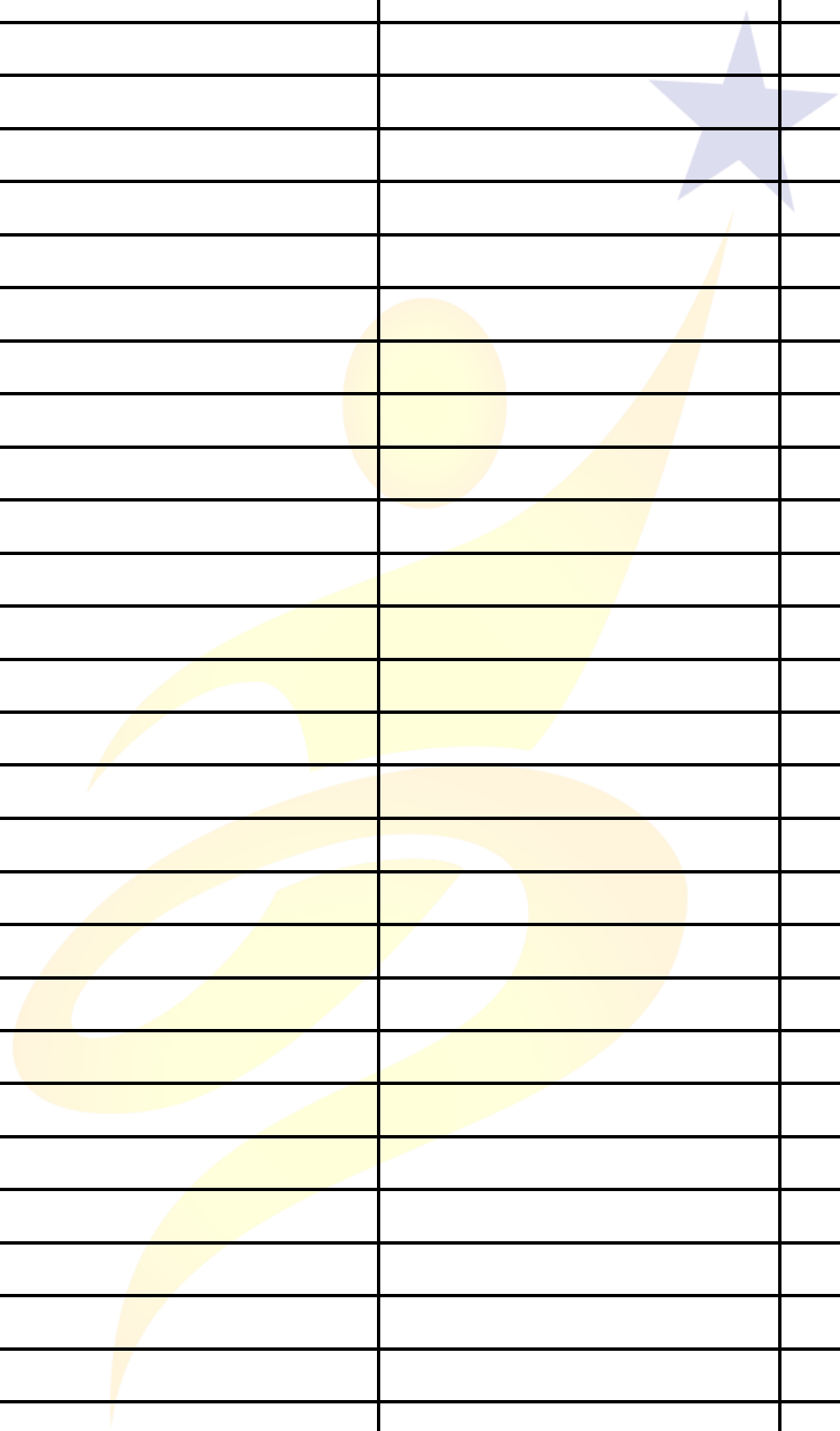
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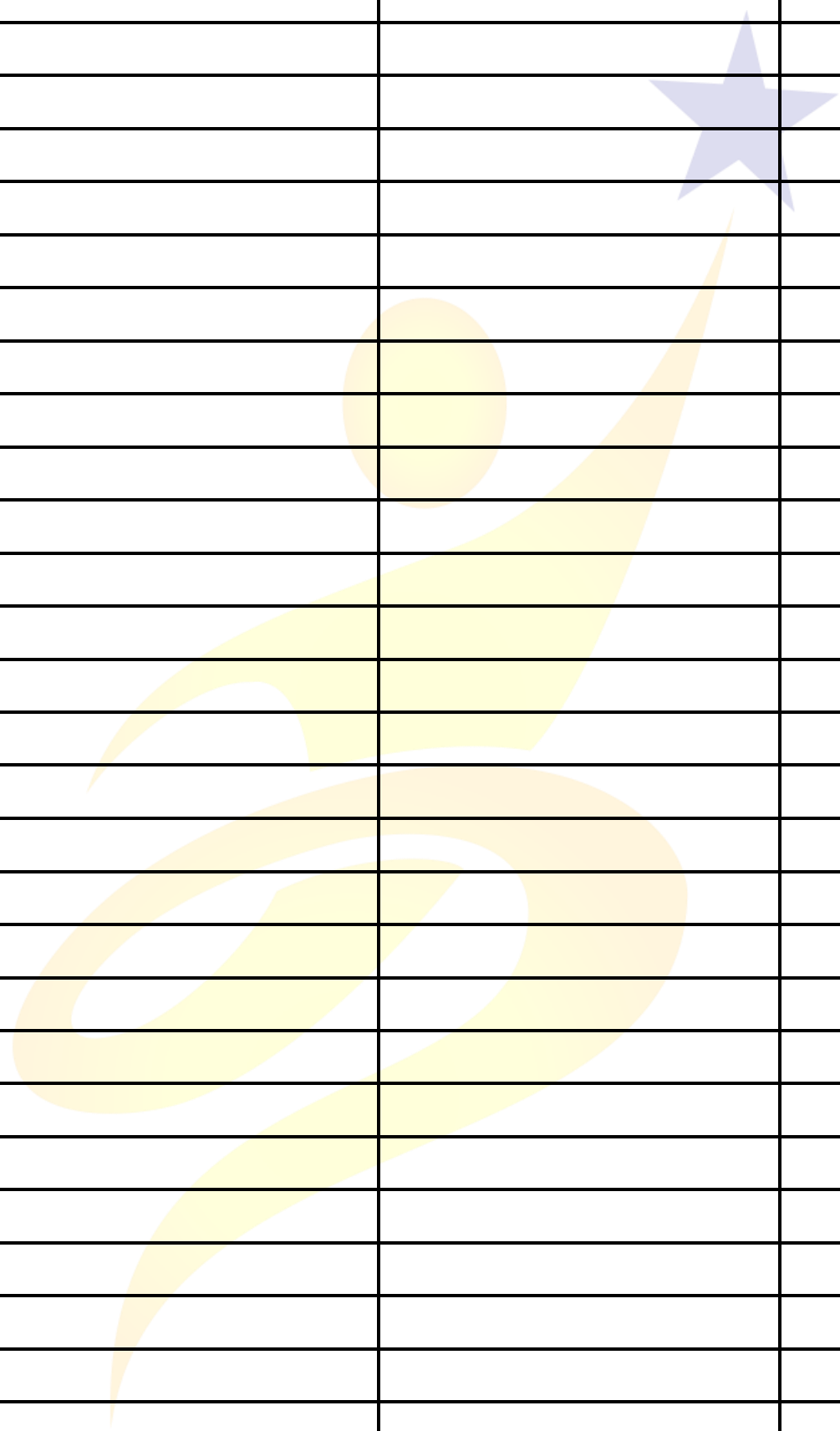
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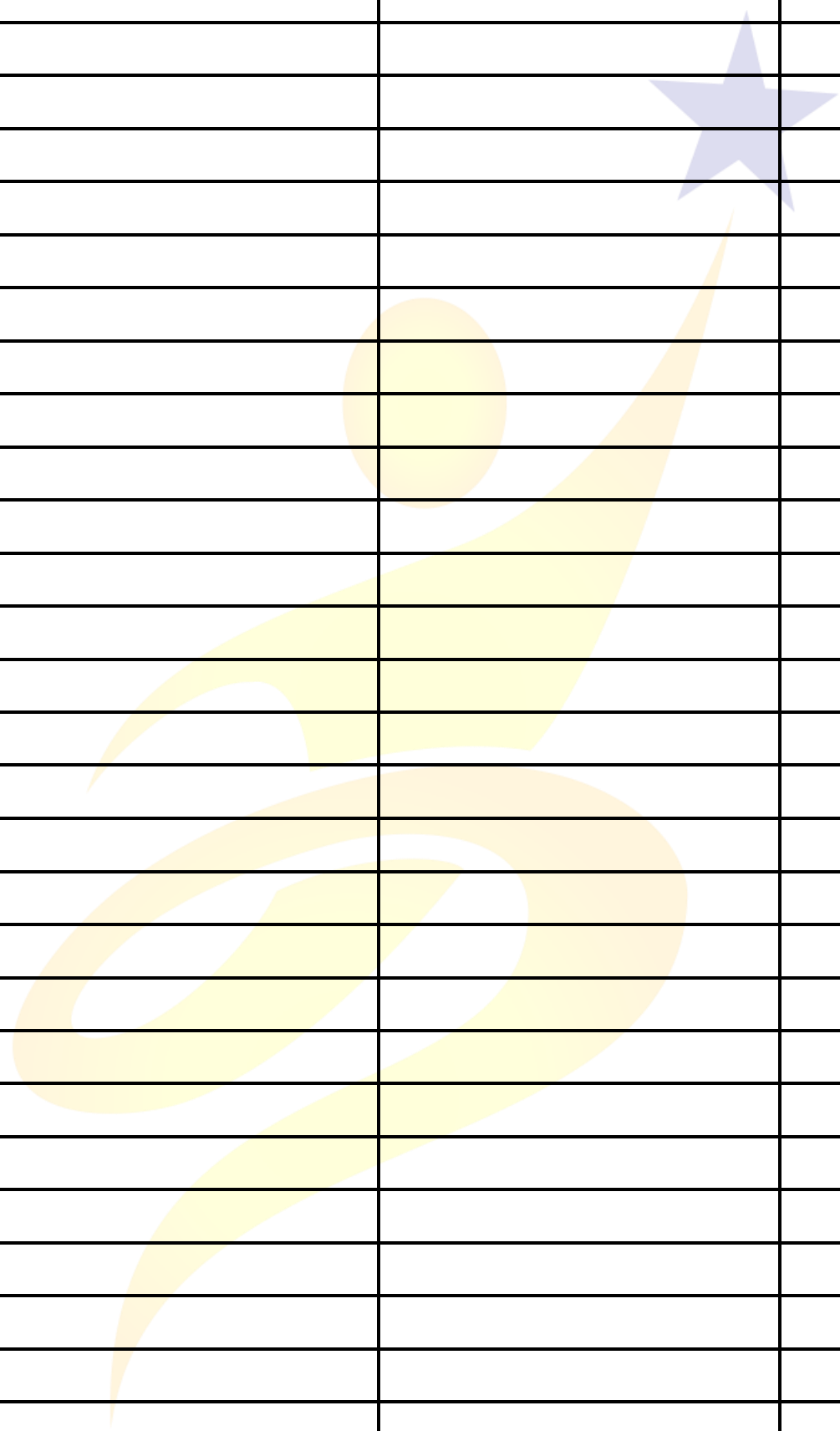
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