## BIRLA PUBLIC SCHOOL, DOHA, QATAR Circular for Grades VI to VIII

Dear Parent,

Subject: "Brainwave Duo Challenge" - A Parent-Child Quiz Event

We are pleased to invite the parents and students of Grades VI- VIII to participate in the 'Brainwave Duo Challenge', a unique quiz event designed to celebrate learning, bonding, and teamwork between parents and children.

#### **Event Details:**

- Event Name: Brainwave Duo Challenge
- Date: Saturday, 24 May 2025
- Last date to submit parent consent form to the class teacher Thursday, 8 May 2025
- Format:
  - Each team will consist of one parent and their child.
  - o The event will kick off with a Preliminary Written Round 25 Questions.
  - Both parent and child will take the quiz independently.
  - A total of 10 pairs will be selected for the final round based on the combined scores of the parent and child.
  - o The final round will be held on Saturday, 24 May 2025 at Basant Kumar Birla Auditorium

#### Topics for the Quiz: -

English Vocabulary, Pattern Recognition, Logical Reasoning, Sports, Cinema, Indian History, Qatar and English literature, Comics/Cartoon and Current Affairs, Family Bond

This is a fantastic opportunity to collaborate as a family, put your knowledge to the test, and create lasting memories together. Whether you are trivia buffs or just in it for fun, this event promises something for everyone.

Warm regards,

Dr. Anand R. Nair

Principal

### BIRLA PUBLIC SCHOOL, DOHA – QATAR

# Parent Consent Form for "Brainwave Duo Challenge" – A Parent-Child Quiz Event (Circular No : BPS/EC/2025-26/18)

I narent	of	class	div	admission no
I, parent of, class div admission no hereby allow my child to participate in the organized				
by Birla Public School.	· · · · · · · · · · · · · · · · · · ·			07gam20a
I shall ensure that my child will abide be does not have any allergies, medical cohim/her from safely participating in the	nditions, health o	O .		
I understand that the school will take a case of any unforeseen incident, I will			afeguard my w	ard. However, in
By signing this form, I confirm that I had I agree to provide my consent for child as a team member.				
<u>Participant Details</u>				
Candidate - 1		Candidate - 2		
	Name	of the Parent / Guar	rdian	
Name of Student:				
	Relatio	onship to the studer	ıt	
Grade and Division	Contac	et No		
Admission No	Email.	Address		
Sincerely,				
Signature of the parent	_	Date	_	
Name of parent	Mobi	le number		