



SALWAN PUBLIC SCHOOL, RAJENDRA NAGAR

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Movie Screening of Patriotic Film 'IKKIS' CLASS: VI - IX

SPS/890/2026

27th January 2026

Dear Parent,

As part of our continued efforts to nurture responsible, aware, and value-driven citizens, the school is pleased to announce a special movie screening of the patriotic film 'Ikkis' for our students. This initiative aims to instil love for the nation, respect for our heroes, and a deeper sense of civic responsibility among students through meaningful cinema.

Details of the Movie Screening:

Movie: *Ikkis (Patriotic Film)*

Venue: Cinepolis, NSP Pitampura – Pacific Mall

DATE	CLASSES
2nd February, 2026	VIII & IX
3rd February, 2026	VI & VII

Amount per child: ₹280/- The amount includes: Movie ticket, Popcorn, Soft drink ,Veg burger.

Parents of interested students are requested to ensure that the required amount is submitted in cash to the respective class teacher alongwith the consent form **latest by 28th January 2026**.

Kindly note, that no submissions will be accepted after the due date, and late payments will not be entertained under any circumstances.

Important Instructions:

- Students must wear their proper school uniform and I-Card.
- Students will be accompanied by school teachers at all times.
- The movie screening will take place during regular school hours.
- Students will depart from and return to school as per usual timings.
- Transportation to and from the venue will be provided by school transport.

Let us come together to give our students an experience that combines **learning, inspiration, and patriotism**, helping them connect emotionally with the values that define our nation.

Regards,

Priyanka Barara
Principal

Consent Form

I, _____, parent of _____, Class/Section _____, Admission Number _____, hereby give my consent for my ward to attend the movie screening of '*Ikki*' at **Cinepolis, NSP Pitampura – Pacific Mall.**

I confirm that I have paid ₹280/- through cash payment to class teacher. I understand that the school authorities, teachers, and tour escorts will take all reasonable care and precautions to ensure the safety of my ward. I also acknowledge that the school shall not be held responsible for any unforeseen incidents.

I further understand that **no refund will be claimed** in case my ward is unable to attend on the scheduled date.

In case of emergency, my contact details are:

Parent Name: _____

Mobile Number: _____

Parent Signature: _____

Date: _____