



Vyakti Vikas Kendra India

Delhi Information Centre, 216 C Humayunpur, New Delhi-110 029
Tel : 43232201/02, 98100 78867
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**Advance course in
Dwarka**
Course Dates :
18-21 April 2013
(reporting 17th Apr 2013 @ 6.00 pm)

REGISTRATION FORM

PLEASE FILL THIS FORM AND RETURN IT WITH CONTRIBUTION AT YOUR Center OFFICE

Apex Body _____ Info. Center _____

Name: Miss/Mrs/Mr. _____ Male/Female _____

Address: _____

State _____ Pin Code _____

Phone (R): _____ Mobile: _____

email: _____

Age: _____ Profession: _____

Any Special Health Condition _____

Course Contribution
• Rs 4500
Accommodation on request

Details of AOL Courses done

- AOL Part I - Place: _____ Month & Year: _____ Teacher: _____
 AOL Part II DSN Sahaj Samadhi Meditation Sri Sri Yoga

Details of non-refundable contribution (Course plus Accommodation, if requested)

Amount Rs. _____ in cash/DD No. _____ dated _____ drawn on _____
_____ Bank,

Declaration:-

I am participating in this "AOL -II" Course on my own will and I take full responsibility for participating in this Course. I release Vyakti Vikas Kendra India, all organizers, coordinators and assistants of this Course from all damages whatsoever and waive all rights to compensation. I declare that I am physically and mentally able to participate in this Course. I undertake that I will not teach any of the techniques of the Course unless I have been fully trained by **HIS HOLINESS SRI SRI RAVI SHANKAR JI**. I have read the AOL-II circular and agree to abide by the rules & conditions.

Date: _____

Signature: _____

ACKNOWLEDGEMENT SLIP

IMPORTANT: PLEASE CARRY THE ACKNOWLEDGEMENT SLIP WITH YOU ON 17 April 2013 6:00 PM

Received from _____ resident of _____ City/Information Center,
a sum of Rs. _____ by Cash/DD No. _____ dated _____ on _____
Bank, on account of AOL Part-II Course in New Delhi.

Signature of Recipient _____ Name _____ Date _____ Mobile: _____