

Form n°

Date : Hour

SHIV YOG MAURITIUS

ABS Geetanjali Ltd

All information on this form will be kept confidential. All courses will be conducted in English.

SHIVYOG MINDFULNESS 2017

9th to 15th November 2017

9th, 10th, 13th to 15th November from 4:30pm to 10 pm & 11th, 12th November from 9am to 5pm

BPML Bldg – CYBERCITY 1 - EBENE - Mauritius

ID Card N°. :

Name: Male ☐ Female ☐

Address:

Mobile: Date of birth:

Profession: Home Tel:

Email:

I accept to receive email messages from Shivyog Mauritius: YES ☐ NO ☐

Have you attended any of Babaji's programs ? NO: ☐ YES: ☐

Details of last program attended (if any). Date: City:

REGISTRATION CATEGORY DONATION AMOUNT:

CHEQUE ☐ Bank: Cheque Number

RECEIPT N°: Name of the sadhaks on Registration Seva

Declaration

I am participating in the Sadhna program at my own will. I take full responsibility for participating in this program, its outcome whatsoever. I will maintain the sanctity of the program and keep the proceedings of the program confidential. I will maintain the discipline during the program and I understand that if my conduct is found to be inappropriate, I would be asked to vacate the premises and I will be refused admission in the program. The donation for the program is **Non Refundable** and **Non Transferable**.

Date: Place: Signature:

Recording the program content by any device or mode is strictly prohibited. Anyone found doing recording will be asked to leave the venue and his registration will be cancelled. It is strictly prohibited to distribute material which constitute any form of advertisement to sadhaks during the workshop.