

Centre for Vedanta Studies
University of Kerala
Karyavattom.P.O, Thiruvananthapuram, Kerala 695581

BHASASAMAROHAI

2017 March 30-31

Registration Form

Name :

Male/Female :

Date of Birth :

Permanent Address :

Present Address :

Educational Qualification :

Name of the Institution Working/Studying :

Designation :

Regular Teacher/Guest Teacher/
Research Scholar/PG Student/Other :

Amount of Registration Fee :

E-mail ID :

Mobile No: :

Date:

SIGNATURE