

| Swami Vivekananda Cultural Centre High commission of India, Suva | | |
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| PO Box 471, Level 6, LICI Building, Butt Street, Suva Phone: 3301125, 3301150 Fax: 3301032 email: <u>culture.suva@mea.gov.in</u> | | |
| Registration Form for Yoga Teacher Training Programme | | |
| (Starts from 1 st week of August, 2022 to last week of January, 2023) | | |
| 1. | Name of applicant: | |
| 2. | Father's name: | |
| 3. | Age / Gender: | |
| 4. | Nationality: | |
| 5. | Qualification: | |
| 6. | Postal Address: | |
| 7. | Email: | |
| 8. | Phone: | |
| 9. | Signature of the Applicant | |
| FOR OFFICIAL USE ONLY: | | |
| Registration No: | | |
| Teacher's Signature | | |
| Director's Approval | | |
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