

Swami Vivekananda Cultural Centre High Commission of India

PO Box 471, Level 6, LICI Building, Butt Street, Suva Phone: 3301125, 3301150 | Fax: 3301032 | email: culture.suva@mea.gov.in

Registration Form for Enrollment: Please fill one form per class.

(Please attach a copy of your birth certificate / copy of passport for identity proof and a Passport size photograph)

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Instrumental:	Tabla			Harmoni	ium			
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Indian Classical Dance:	Kathak			Bharatnaty	am [Bhangra	#9,
	Yoga		Vocal]	Music Cama	atic		Hindi [
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Name:								
Date of Birth:		. •	•	4.			• .	
Age / Gender:								
Qualification:		٠,۴			•			
Postal Address								· · · ·
Email:				·	بار ط			
Phone:		,	•		. •	•		
Signature of the Applicant			•		•	Date:		
(If applicant is less than 18 year	rs of age Pa	arent or Gu	ardian ne	eds to sign on	their behalj	Ð		**.
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	FO	R OFFI	CIAL U	SE ONLY:	,	••	- " "	
Registration No:			Ι	Discipline &	Batch No); /		
·			T	eacher's Sig	gnature			
Director's Approval								