

**THE HINDU SOCIETY OF MANITOBA
DR. MADHURI JAIN VIDYA BHAVAN
REGISTRATION FORM
YEAR 2014**



PLEASE PRINT CLEARLY

- Name of the Student _____
- Age _____ years

CONTACT INFORMATION

Gaurdian's Name: 1 _____ 2 _____

Home Phone # _____ Cell Phone _____

Email Address _____

Course Selection: PLEAE CHECK

	HINDI	NEPALI	TAMIL	TELUGU	MATHEMATICS	
					GRADE 7-9	GRADE 10-12
BEGINNERS						
INTERMEDIATE						
ADVANCE						

Fee : \$ 30 / Student / year / Course

PAID		Received By	DATE
CASH:			
CHEQUE:			

Please make CHEQUE payable to : HINDU SOCIETY OF MANITOBA

SIGNATURE OF THE PARENT _____ DATE _____