

**Pre-registration Form for participating in Lord's Darshan and Abhiseka
at the Arsha Vidya Gurukulam**

Do we have your mailing address if Yes, then please provide us your name, email and telephone number. If not, please sign-in

No of Visitor / s:.....

Date of Visit:.....

Name:

First.....**Last**.....

Address:.....

City..... **State**..... **Zip**.....

E-mail:.....**Initial:**.....

Preferred Tel. No Mobile / landline.....

Note: Packed /carryout lunch will be provided around 12:15 pm If interested, please inform:

Yes No.....

Thank you for your visit.