

Greens Ayurveda Study Center- Azhiyur
www.greensayurveda.com

STUDENTS REGISTRATION FORM



Course Name :.....

Course Code :.....

Date of joining :.....

Course duration:

Student code:.....(for office use)

Name :.....

Age :..... Sex:..... Date of Birth:.....

Address :.....

In Emergency, phone no.:.....

Email Id :.....

Phone number:..... Whatsapp phone number:.....

Country of citizenship:..... Occupation:.....

Academic achievements :.....

Professional qualification :.....

Previous experience in Ayurveda:.....

Motivation to study Ayurveda:.....

Future plan :.....

Date:.....

Signature:.....