SUKH NIVAS RESERVATION FORM

July 24th 2014 - Tiruppur

Date: _____ Centre: _____

State: _____ Contact Person Name: _____

Contact Address: _____

_____

Mobile: _____ Email Address: _____

S. No.	Full Name	Age	Gender (M/F)	Arrival Date	Arrival Time	Departure Date	Departure Time
1.							
2.							
3.							
4.							
5.							
6.							

Payment Details			
Total Amount		Payment Mode	DD
DD Number			
Bank Name			

Instructions

1. Please fill in all details in CAPITAL letters only.
2. Contact person is one of the names in the list representing the list (can be head of family)
3. Charges per bed (For 5 days – July 21st to July 25th): **Rupees 4000/- (Four Thousand only)**
4. Participants are requested to book as early as possible.
5. Payment to be made by demand draft **payable at Tiruppur** in favour of "**SUKH NIVAS**".
6. Only Demand Drafts are acceptable (No local cheques, RTGS & At Par cheques.)
7. Filled in form along with payment DD to be sent to:

   '**SUKH NIVAS'**
   C/o Shri M. M. DHANUMOORTHI
   LALAJI COTTAGE
   21 J G NAGAR,
   3rd STREET,
   TIRUPPUR - 641602 (T. N.) Ph. 0421-2475574, Email: nivas.sukh@gmail.com

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July 24th 2014 Tiruppur

Sukh Nivas Reservation Acknowledgement

Date: _____ Center :_____ State :_____

Contact Person Name:_____

Number of Beds: _____ Amount paid :_____

DD Number: _____ Bank Name: _____

Received By (Name): _____ Received By (sign): _____