

**BRAHM EDUCATION CENTRE
(NON-PROFIT EDUCATION CENTRE)
9 Lorong 29 Geylang #04-02 Singapore 388065**

Registration Form

Course Title: Hatha Yoga (January 2005)

Please tick the session you want to register:

Beginners Course Monday(6.30pm) Monday(8.00pm)Thursday(6.30pm) Saturday(11.30am)

Intermediate Thursday(8.00pm) Saturday (9.45am)

Dr/Mr/Mrs/Ms:_____BF Membership No:_____

Address:_____ (S)_____

Religion:_____ Occupation:_____

Tel: _____ HP:_____ Email:_____

I hereby enclose cash/cheque for S\$_____Cheque No:_____ Bank:_____

Please make cheque payable to Brahm Education Centre Ltd and mail to 9 Lorong 29 Geylang #04-02 Singapore 388065 Tel: 6745 5007 Fax: 6842 6255 Email: enquiries@brahmec.com
Website: <http://www.brahmec.com>
