

A Workshop on Leisure & Play with Family and friends

Date 17th December 2016 Venue: **WBVHA Tower**, 3rd Floor, 580 Anandapur Kolkata 700 107,
Registration Form

ASWB Member: Yes No

Registration No:..... (for office use)

Name:

Residential Address:.....

..... Pin code/Zip.....

Mo/ Tel :..... Email:.....

For Parents

Name of Child _____ age _____

Do you require Child Care: Yes No Contact no. for emergencies _____

For Professionals

Organization:.....

Designation:.....

Address:.....

Pin code/Zip..... Mobile:..... Email:.....

Registration Details	
Registration fees	Rs 500
Members	Rs.300
Volunteers /Parents of Children in Dikshan & Aspairs	Rs 300
Students	Rs.200
Child Care (Parents must provide the food)	Rs 100

Payment Mode: Cash Demand Draft/cheque (in favor of Autism Society West Bengal)

For online bank transfer may be made to:

Beneficiary: Autism Society West Bengal Bank: Axis Bank Limited

IFSC Code: UTIB0000253 Savings A/C No: 910010027520081

Demand draft should be drawn in favour of 'Autism Society West Bengal' payable at Kolkata.

DD/cheque no.:..... Dated:.....

Total Amount:

Signature _____ Date _____