

INSTITUTE OF LAUGHTER YOGA INDIA

(a unit of Laughter Club Hasya Yoga Kendra)

APPLICATION FORM

COURSE : CERTIFIED LAUGHTER YOGA TEACHER TRAINING COURSE

Period : From 4th June to 7th June, 2007

First Name

Middle Name

Last Name

Date of Birth

Nationality

Address

City

Country

Zip Code

Tele. Nos.

E.Mail

Fee Paid

I wish to join the certified Laughter Yoga Teacher Training course conducted by Institute of Laughter Yoga India.

Signature

Received a sum of Rs.by cash/cheque/dd..... from Mr/Ms
..... for Certified Laughter Yoga Teacher Training workshop held on dated
4th to 7th june, 2007.

Receiptant

For Institute of Laughter Yoga India. www.laughteryogaindia.com