

## **CHHANDAYAN**

## New York City REGISTRATION FOR SITAR LESSONS

Name of the Teacher	signing up for	
Student's Name: Mr./	Mrs./Ms.	
Address		
		Phone (H)
(W)	(Cell)	Fax
Email		Date of Birth/
Emergency contact: Mr./Mrs./Ms		Phone
Previous Lessons, if a	ny	
Physical disability (if	any)	
Type of class registered	ed for:Group	Private
LOCATION: 4 West	, 43 <sup>rd</sup> Street, Ste. 614 New Y	Tork, NY, 10036
Schedule and Registr	ration fee: As posted on the	website
• •	n envelop along with this reg	v.tabla.org. If paying in person with check or gistration form and drop it in our mailbox at
Signature		date
and name		of the person registering in agreement
with the rules of Chha	undayan as stipulated in the b	rochure and this form.