

CERDS MONTESSORI PRACTICAL WORKSHOP

REGISTRATION FORM

I would like to register myself for the Montessori Practical Workshop at:

Mumbai, India

Dubai, UAE

Delhi, India

Bangalore, India

Affix your
Photograph here

Name: _____

Address: _____

City: _____ Country: _____ Nationality: _____

Phone (O) : _____ Mobile : _____

(R) : _____ Email: _____

Occupation: _____

Qualifications: _____

Course Fee: _____

Mode of payment:

(Please write the details)

Cash _____

DD _____

Bank Transfer _____

Online (Credit Card) _____

Form and course fee must reach us before the last date of registration, to

CERDS

G10, Central Plaza Mall,

Sector 53, Golf Course Road, Near Hotel IBIS, Gurgaon, 122002, Haryana, India

Phone: +91-124-4068583, +91-9910034652

NOTE: You may send the scanned copy of the application form to asmita@cerds.com for enrollment.