

NAMGYAL MONASTERY INSTITUTE OF BUDDHIST STUDIES

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SPRING 2010 REGISTRATION FORM

Name _____

Street Address _____

City _____ State _____ Zip _____

Telephone # _____ email _____

COURSE TITLE	SESSION	TUITION
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

Full-time Student Registration _____

Notes _____

TOTAL AMOUNT DUE: _____

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