The AMAZE Charitable Trust



Helping families Navigate the Autism MAZE



www.amazetrust.org

Registration form for Adventure Camp – 28-30 May 2017**

Please complete ,sign ,scan & send this form by email to <u>amaze1209@gmail.com</u>

I / We confirm that the following members will be attending the "Adventure Camp for Persons with Special needs and their families" from 28 May 2017 to 30 May 2017 @ Pembroke Estate, Manjacombai, Nilgiris Dist, Tamil Nadu [Near Coonoor].

(Please enter the name of the Person with special needs in the first row)

| SI | Name | Age (in Years) | Relationship to person with disability | Amount (Rs) |
|---|------|-----------------------|---|----------------|
| 1. | | | Person with special needs | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| Aide required | | | Yes / No | |
| Transport required from Coimbatore to Camp | | Yes / No | If "Yes", No. of person's (incl. special person): (cost to be shared based on actual) | |
| TOTAL AMOUNT TRANSFERRED by Online /DD /Cheque Number : | | | | Rs |

Contact phone number: ______email id: _____email id: _____

SIGNATURE