

Self-Realization Fellowship
HOW-TO-LIVE YOUTH PROGRAMS

2017 SUMMER DAY PROGRAM
Based on the teachings of Paramahansa Yogananda

SCHOLARSHIP REQUEST

Name of child _____

Name of parent(s) _____

Address _____

Telephone numbers: (daytime)_____ (evening)_____

2017 Program Registration Fee: 225.00 / \$250.00

- \$250 – Lunch included
- \$225 – Lunch not included

I/We can pay: \$ _____

I/We are requesting a scholarship of: \$ _____

Reason scholarship assistance is being requested:
