

Price: `1
SRI KALAHASTEESWARA SWAMYVARI ROOM BOOKING

Room Type:*:□ALL□AC □ NONAC	
Check in Date *:	
<u>Devotee Details</u>	
Aadhar Card No:	Devotee Name*:
Proof Document Name*:	Proof Document No*:
Gothram:	Nakshatram:
Gender*: ☐Male☐ Female Age:	Mobile Number:*
Email Id:	House No:
Street Name/Location*:	
Country*: INDIA State*:	District*:
Mandal*: Village	e*: Pin Code:
<u>Informant Details</u>	
Informant Name*:	Informant Relation*:
Documents List :	
(NOTE: 1.Total size of Upload Document should not exceed	ed 3 MB.2. All Upload Documents should be in PDF Format Only)
1. Application Form*	
2. Identity Proof *	

Applicant's Signature