

**WESTERN SINGH SABHA ASSOCIATION**  
**3015 PINE STREET, WILLIAMS LAKE**

Gurdwara Booking Form singhsabha2@gmail.com

**Full contact details required**

First Name..... Middle Name.....Last Name.....

Address.....

Mobile.....Alternative Phone.....

Email.....Confirm Email.....

Date/ Dates Seva Requested for Day.....Month.....Year 20 .....

Morning  Evening **Location**  Home  Gurdwara

**Seva Requested (please check the required box/boxes)**

Akhand Path  Sehaj Path  Sukhmani Sahib  Langar  Anand Karj

ਬੇਨਤੀ: ਗੁਰੂ ਘਰ ਦੇ ਉਪ੍ਰੋਕਤ ਪ੍ਰੋਗਰਾਮ ਅਕਾਲ ਤਖਤ ਸਾਹਿਬ ਦੀ ਰਹਿਤ ਮਰਿਯਾਦਾ ਅਨੁਸਾਰ ਨਿਭਾਏ ਜਾਂਦੇ ਹਨ ਅਤੇ ਪ੍ਰਬੰਧਕ ਕਮੇਟੀ ਸੰਗਤ ਪਾਸੋਂ ਸਹਿਯੋਗ ਅਤੇ ਬਚਨਬੱਧਤਾ ਦੀ ਉਮੀਦ ਰੱਖਦੀ ਹੈ।

**Kitchen Use**  **Borrowing Utensils**

Program cannot be booked without full contact details.

All services performed in accordance to Sri Akal Takhat Rehat Maryada.

Bookings are subject to availability and confirmed only after committee members signatures.

Signature..... Day.....Month.....Year 202.....

**Office use only** (Booking for .....) )

Booking person's Full Name.....

Signature.....Day.....Month.....Year 202.....

Approved By 1 ..... 2..... 3 .....