

H. H. GOPAL KRISHNA GOSWAMI

DISCIPLES DATA FORM (official)

Spiritual Name.....

Date of 1st Initiation..... City of 1st Initiation.....

Date of 2nd Initiation..... City of 2nd Initiation.....

Date you joined ISKCON.....

City where you joined ISKCON.....

Year you began chanting 16 rounds.....

Devotional Services.....

First Name..... Last Name..... Sex: M F

Date of Birth..... Ethnicity at Birth..... (Indian, African, etc.)

E-mail : 1.

2.

Home Phone (Including Country code & Area Code) :

Business Phone/Mobile (Including Country code & Area Code) :

Permanent Address (Home) :

Present Address :

Marital Status : Single Seeking Engaged Married

Separated Divorced Widow(er)

Note :

Name of Spouse (including name of Guru) :

Name of Children/Devotee relation (including name of Guru) :

Living in :

Temple

Temple community

Connected to a temple? If yes which temple?.....

Is a Member of : Name Hatta Bhakti Vrksa

Counselor Group Satsang Group Other Group Not a member of any group

PHOTOGRAPH
Do not stick
staple only

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Disciple Signature

Place.....

Date __/__/__

For Office use only

Assistant	A,B,C,D,E,F,G,H,K,L,M,N.....
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Postal Address:
GKG Office
Room No.14, Administrative Block
ISKCON Temple, Sant Nagar
East of Kailash, New Delhi
Ph. 011-26235133-36,Ext.214