Buddhist and Pali University of Sri Lanka

Registration Form to use the University Body Fitness Centre

Academic Year 2023/2024

1.	Full Name:	
2.	Registration Number:	
3.	Academic Year:	
4.	Telephone Number:	
5.	Name & Telephone Number:	
6.	Medical Report : Attached / Not Attached (Compulsory)	
	I certify that the above information are true and correct	
	Date	Signature
Recom	mendation:	
•	Warden / Marshall	
Rev./M	r applic	eation is recommended/ not recommended
	date	signature
•	Assistant Registrar - Academic	
	Date	Signature
•	Body Fitness Instructor	
		Signature