

PRIVATE PUJA SERVICES SPONSORSHIP FORM

ANANDA MANDIR, Inc.

269 Cedar Grove Lane, Somerset, NJ 08873-5212

Phone: (732)-873-9821

Private Puja Services: Contact the temple and fill out this form (available at www.anandamandir.org under **Religious Services**)

***Please Note:**

1. A service is provided **ONLY**, beyond normal temple hours and if they do not conflict with Ananda Mandir's scheduled programs.
2. Devotees **MUST** pre-schedule the services with the temple ahead of time and **with the full payment**.
3. All private puja services are **first come, first served basis**. Timings may be changed during festivals and special occasions.

PUJA Services		<u>At The Temple</u> Price	<u>At Devotee's Home</u> Price	Payment Received	Detailed Information
Satyanaryan Puja	<input type="checkbox"/>	\$100.00	\$150.00	<input type="checkbox"/>	
Shyama Puja	<input type="checkbox"/>	\$100.00	\$150.00	<input type="checkbox"/>	
Wedding	<input type="checkbox"/>	\$350.00	\$400.00	<input type="checkbox"/>	
Nandimukh ,Ashirbad	<input type="checkbox"/>	\$200.00	\$250.00	<input type="checkbox"/>	
Upanayan(Paitey)	<input type="checkbox"/>	\$350.00	\$400.00	<input type="checkbox"/>	
Annaprasan	<input type="checkbox"/>	\$125.00	\$150.00	<input type="checkbox"/>	
Ghriha Probesh	<input type="checkbox"/>	Not Applicable	\$250.00	<input type="checkbox"/>	
Adya Sraddha	<input type="checkbox"/>	\$250.00	\$300.00	<input type="checkbox"/>	
Batsarik Sraddha	<input type="checkbox"/>	\$150.00	\$200.00	<input type="checkbox"/>	
Chaturthi Sraddha	<input type="checkbox"/>	\$120.00	\$150.00	<input type="checkbox"/>	
Chandi Paath	<input type="checkbox"/>	Not Applicable	\$150.00	<input type="checkbox"/>	
Puja Organized by Club	<input type="checkbox"/>	Not Applicable	\$500.00	<input type="checkbox"/>	
Date of Service: ___/___/_____		Total Amount:		Date of Payment: ___/___/_____	

Devotee's Information:

Print Name: _____

Phone Number: _____

Address: _____

Email: _____

Signature: _____

Date: ___/___/_____

Collector's Name: _____

Payment Method: Check Cash Credit Card

CHECK #:	CASH TOTAL:	CREDIT CARD#: Expiration Date: ___/___/_____
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