



SVHCC & Temple



BALAVIHAR ENROLLMENT FORM 2019-2020

Instructions:

- 1) PLEASE complete all parts of the form.
- 2) **There will be late fees of \$25 for enrollment forms submitted after September 15, 2019.**
- 3) The Enrollments forms and the fees can be given to Sanjeevi Tivakaran at the temple when coming to the class.
- 4) **Please submit separate enrollment form for each student.**

Student name: (FIRST, LAST): _____ (M) _____ (F) _____

GRADE: _____ BIRTHDAY: (M/D/Y): _____ Student email: _____

ADDRESS: _____

PARENT INFORMATION: Please check the box P: (), for the email that needs to be used as primary contact

Father: _____

Cell #: _____ Home #: _____

Mother: _____

Cell #: _____ Home#: _____

Email: Father: _____ **P:()** Mother: _____ **P:()**

CONSENT: I consent to the enrollment of my child in the Balavihar Class (BV). I hereby release the SVHCC & Temple, the BV organizers, volunteers, employees & agents from any liability for any accident, damages or injuries that my child or family may incur while attending the BV program & related activities including transportation, meals & food allergies. We give consent to administer any first aid in situations requiring medical attention, I am responsible for all medical & other related expenses for my child & family.

4 year – Pre K class parents: Agree that parent/designated guardian will be present at all times in the temple premises during Balavihar class and related activities.

I agree that it is our (parents/students) responsibility to monitor for any food allergies and take care of necessary precautions and medicines that needs to be administered.

Agree to the Balavihar rules and guidelines as detailed in the svhinduculturalcenter.com

We give permission to post our child's picture at the SVHCC & TEMPLE website.

Parent Signature: Father: _____ Mother: _____

Enrollment fee: \$100 per year for each student.

Make Checks payable to: S.V. HINDU CULTURAL CENTER & TEMPLE or can pay by cash.

Mention: "Balavihar Enrollment fee" in the memo section of the check.

Additional Tax Deductible Donation for Balavihar related Activities: \$ _____

Mention: "Donation for Balavihar" in the memo section of the check.

TOTAL AMOUNT BEING PAID: \$ _____ ☐ Check ☐ Cash