



# Hindu Temple of North Texas (HTNT) Sri Ganesha Temple, Plano, Texas



## HTNT “Sri Ganesha Vidya Vihar” Registration Form

Applying for class: \_\_\_ Bhajans \_\_\_ Slokas \_\_\_ Gita Chanting / Sloka ----- Veda

\_\_\_\_\_ Specify Language ( \_\_\_\_\_ )

Student’s Name \_\_\_\_\_ Nickname \_\_\_\_\_

Parent(s) or Guardian(s) Name(s) \_\_\_\_\_

Date of Birth (if Child) \_\_\_\_/\_\_\_\_/\_\_\_\_ grade in school (or age) for 2013-14 \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_ Household e-mail Address \_\_\_\_\_

Allergies or other conditions we should be aware of (food reactions, physical limitations, et cetera...]

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Emergency contact (name, phone # and relationship) \_\_\_\_\_  
 \_\_\_\_\_

I am available to help . . .

As a substitute teacher  As a parent helper in the classroom

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I, the undersigned parent or guardian, do hereby authorize emergency medical, dental, health or hospital services be rendered to my child upon consent of Sri Ganesha Temple designated volunteer. The purpose of this authorization is to permit my child to receive emergency medical attention when needed while involved in the activities connected with Sri Ganesha Temple Vidya Vihar program when I or my emergency contact is unavailable to give such consent. This authorization shall be effective from October 2013 till September 2014.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_