

Sanskriti

(2012 – 2013)

Please fill one application for each child

Student's Name (last) _____ (first) _____

Grade as of (9/12) _____ **Age** as of (9/12) _____ Birthday ____/____/____ Gender _____

Enrollment: Both Classes (Language and Culture): _____ **Language only: Hindi** _____ **/Gujarati** _____
Culture only _____

Home Address

Home Phone _____

E-mail Address (mother) _____

Email Address (father) _____

Mother's/Guardian's Name _____

Mother's Place of Employment _____ Occupation _____

Employment Address

Work Phone _____ **Cell Phone** _____

Father's/Guardian's Name _____

Father's Place of Employment _____ Occupation _____

Employment Address

Work Phone _____ **Cell Phone** _____

T-Shirt Size: **Youth:** ___ Small ___ Medium ___ Large ; **Adult:** ___ Small ___ Medium ___ Large ___ XLarge
Additional shirts are available at \$6.00 each. If interested, please indicate size(s) _____

VOLUNTEERING AT SANSKRITI

Since this is a volunteer run school, **all parents are expected to volunteer in at least one** of the following areas (and more if you are able). Please check off the general area(s) that you will be volunteering in:

Teaching
 Assistant/Substitute teaching
 Newsletter
 Community Service
 Library
 Lesson planning/Powerpoints

Administrative Tasks
 Website
 Event Planning
 Volunteer Coordination
 Fundraising

EMERGENCY CONTACTS/ PICK-UP ALTERNATIVE

These persons will be authorized to pick-up your child at any time. **In an emergency these people must be able to arrive within one hour.** Please list **three** contacts other than parents/guardians. We will not release your child to any other persons unless we receive a written note or phone call stating the name, telephone number, and relationship of the pick-up contact. (Identification will be required).

1. Name _____ Phone _____ Relationship _____

2. Name _____ Phone _____ Relationship _____

3. Name _____ Phone _____ Relationship _____

Who May **NOT** Pick-Up Your Child? _____ (Please attach any supporting documents)

List any **medical conditions** for which the child is currently under the care of a physician:

Current treatments and restrictions due to above:

List any medications the child is taking:

Medications to be administered at school must be in original container accompanied by written and signed instructions of the parents or doctor. Students may not carry medications at any time.

Off-site trips: Permission is hereby granted to Sanskriti of NJ to take my child to the outdoor playground area and on trips as part of the regular program. Parents will be notified in advance of any impending trip.
Initials _____

Permission is granted to Sanskriti of NJ to use photographs/videos of my child for use of Sanskriti publicity. Sanskriti of NJ values its members' privacy. No photos or videos will be made without consent of the parent.

____ Photos Permitted _____ No Photos Permitted Initials _____

PARENT/GUARDIAN AND SANSKRITI of NJ AGREEMENT

Rules for acceptance and participation in cultural school are the same for everyone without regard to race, color, national origin, sex, age or disability.

It is understood that all students will be treated as individuals and respect will be shown for normal differences in tastes, preferences, abilities and range of behavior patterns.

By signing this agreement, I agree to place my child in the care of the SANSKRITI of NJ volunteers/ staff, subject to its rules and requirements. I give permission for him/her to take part in all school activities and field trips. I will review and reinforce the school conduct policy with my child prior to the start of school. Children not following the conduct policy may be suspended or expelled from school with **no refund**. In the event the responsible parents/guardians cannot be reached, I give my permission to the medical personnel selected by SANAKRITI of NJ to transport, hospitalize, secure proper treatment and to order injections, x-rays, routine tests, anesthesia or surgery for my child and to release any records necessary for insurance purposes.

Fees:

May-June 10:

\$300 per year for both classes for Sanskriti of NJ members; \$350 for non-members
\$225 per year for one class for Sanskriti of NJ members; \$250 for non-members

June 11-July 11:

\$350 per year for both classes for Sanskriti of NJ members; \$400 for non-members
\$250 per year for one class for Sanskriti of NJ members; \$275 for non-members

July 12-Aug 12: (enrollment maybe limited depending on availability of seats in a class)

\$400 per year for both classes for Sanskriti of NJ members; \$450 for non-members
\$275 per year for one class for Sanskriti of NJ members; \$300 for non-members

Sibling discount 10%

PARENT/GUARDIAN SIGNATURE: _____

DATE: _____

Please send the completed form along with a check made to Sanskriti of NJ to:

SANSKRITI
C/o Irma Maini
44 Oakwood Avenue
Livingston, NJ 07039

