Chinmaya Mission Bakersfield

1723 Country Breeze PI, Bakersfield, CA 93312 Phone: (661) 201-4541 Web: bakersfield.chinmayamission.com

2024-2025 Bala Vihar Enrollment form

This application form (boxes with gray background) can be filled with Microsoft word. If you want to fill the application with a pen/pencil, please fill the form legibly (CAPITALS PREFERRED). It would be helpful for data entry.

Information about registering member

Existing Member Please check this box, if you were an existing member of CMB. Please indicate the year, in which you were first enrolled in.		
New Member	Please check this box, if you are a new member in 2024.	2024

Preferred communication method

CMB regularly communicates with its members about upcoming events and programs, as needed. Please select **one** of the following methods for member communication. Both email & USPS preferred

Email preferred

USPS preferred

Parent (or Guardian) Information Last Name: Father's First Name: Information Mobile: Email: Last Name: Mother's First Name: Information Mobile: Email: Line 1: Line 2: **Home Address** CA, 93 City, State, Zip: **Phone:** Last Name: Emergency **First Name:** Contact Phone:

Children Information			
1 st Child Information	Last Name:		
	First Name:		
	Gender:	Female	Male
	Date-of-Birth:		
	Grade (in 2024-25):		
	Attending Language Class:	Gujarati	Hindi

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	Last Name:	
2 nd Child Information	First Name:	
	Gender:	Female Male
	Date-of-Birth:	
	Grade (in 2024-25):	
3 rd Child Information	Attending Language Class:	Gujarati Hindi
	Last Name:	
	First Name:	
	Gender:	Female Male
	Date-of-Birth:	
	Grade (in 2024-25):	
	Attending Language Class:	🗌 Gujarati 🗌 Hindi

Payment information & Volunteer requirement

Annual Fees:

- Bala Vihar enrollment fee is **\$300/year** for each child.
- Enrollment fee includes these classes: language, Chanting, and Swaranjali.

Deductions:

• A deduction of **\$150 per child** will be applied, **after** the 3rd child enrollment.

Volunteering:

At least one parent/guardian must be present, during Balavihar classes.

Every family is required to give 10 hours or more of volunteer service to Chinmaya Gokul, during the school year. Please fill out the sign-up sheet to indicate the area of interest for this service.

FOR OFFICE USE ONLY			
Amount Received:	Date:	Check #:	Initials:
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Disclaimer/Medical Release

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Names of the enrolled children

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Mother's Name:	Phone:
Father's Name:	Phone:
Emergency Contact:	Phone:
Physician's Name:	Phone:
Dentist's Name:	Phone:

Medical Information

Medical Conditions, if any:

Medical Insurance Info: Insurance Company: Insurance Policy: Policy Holder:

I give permission for my children to participate in the Bala Vihar program from **Aug 2024 to May 2025**. Hereby release Chinmaya Mission Bakersfield (CMB), its staff and volunteers from any responsibility and liability for any illness or injury that my children may sustain during this activity, including COVID-19.

I understand that I need to be present on the premises during the Bala Vihar program. In the event that I am unable to be present, in the event of an emergency, I hereby authorize an adult Chinmaya Mission Bakersfield (CMB) volunteer to take whatever emergency measures that are judged necessary for the care and protection of my children.

In the event of an emergency, I understand that my children will be transported by a local emergency unit for treatment, if deemed necessary by a CMB volunteer. In certain medical situations, the local emergency resource may be contacted prior to contacting the child's parent or physician.

Parent Name	Parent Signature	Date