

# REGISTRATION FORM for GURUKUL

(Indian Heritage & Cultural Classes)

**VENUE:­ SSV Temple USA (1916 Lakewood Rd., Toms River, NJ 08755)**

Applied for the Class: ………………………./…………………………./…………………….

Session:............................... Timings of classes:­ Every Sunday 12 PM to 2 PM

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Name:......................... ………......................Sex:........DOB:­.........../………./…………..

Allergy / any imp. Medical info.:­.....................................................................................

Father / Mother / Guardian Name:.................................................................................

Addresss:...........................................................................................................

Phone: Home:.........................................................Work…………………………

Cell………………………………….Emergency Contact #.........................

EMail: ………………………………………………...

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Registration Fee:­ $ 25.00 per Annum

Paid in CASH ………… OR Check……………….

Received by:­­­­

Name Signature Date

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**Agreement & Release for**

**SSV Temple USA, Indian Cultural & Community Ctr,**

# & GURUKUL

**Please read Agreement and Release carefully.**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby agree as follow:

Print name of Parent/Legal Guardian

In consideration of the services of the Shree Siddhivinayak Temple USA, Indian cultural and

community center, GURUKUL, their volunteer(s)(Sevaks), Trustee(s), Managers, employees, representatives, affiliates, landlords, and all other person or entities associated with Gurukul activities (collectively, the “Releasees”), I and my family agrees as follows:

1. I/We understand that Gurukul is a part of Nonprofit organization and run by volunteers from Shree Siddhivinayak Temple, USA. I/We understand that the classes, religious and cultural activities are conducted by volunteers (Sevaks) of the Shree Siddhivinayak Temple USA and not by professional certified teachers.
2. I/We agree to follow and respect all organization’s rules and regulations, as the same may be amended from time to time.
3. I/We assume and accept full responsibility to notify Gurukul and Temple Executive Board if there is any concern that can be harmful to any member(s) of organization.
4. I/We accept full responsibility to notify Gurukul of any illness, allergy or important medical information. I/We will also update Gurukul ASAP with any change in information provided including any change in emergency contact.
5. I/We grant the Gurukul and Shree Siddhivinayak Temple, USA the right to photograph, videotape, and record me/my family and my child/ward and to use my/family and child name, face, likeness, voice and appearance in connection with exhibitions, publicity, awareness, and promotional materials without any reservation or limitation. Such materials shall be used only for the benefits of Gurukul and Temple organization. Commercial use of such materials shall be strictly prohibited.

RELEASE­ I/We hereby release, discharge the releasees from all liabilities, claims, demands, losses or damages incurred in connection with participation in Gurukul and related activities of organization.

I/We have carefully read, understand this Agreement and Release. I/We acknowledge that it shall be effective and binding upon myself, my family and/or my child/ward and my/my child representatives, successors, heirs, executors, and administrators.

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| Name of Youth participant (Child) | Age | Male/Female |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature of Parent/Guardian | Date | Witness/Sewak: |