

**ISKCON PHOENIX**

Hindi Class Registration Form 2015 - 2016

Donation: \$108.00 first child  
\$151.00 for two kids  
\$11.00 additional kid

**ONE FORM PER FAMILY**

Date \_\_\_\_\_

Child's First Name \_\_\_\_\_ Last Name: \_\_\_\_\_ Age: \_\_\_\_\_

2<sup>nd</sup> Child's Name \_\_\_\_\_ Age: \_\_\_\_\_ 3<sup>rd</sup> Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Any allergies/medical issues teachers need to be aware of \_\_\_\_\_

Father's name: \_\_\_\_\_ Mother's name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone no.: \_\_\_\_\_ Email address: \_\_\_\_\_

Parent signature: \_\_\_\_\_

**FOR OFFICE PURPOSE ONLY**

Donation received on: \_\_\_\_\_ cash \_\_\_\_\_ credit card

Received by: \_\_\_\_\_ check no. \_\_\_\_\_

Notes: \_\_\_\_\_