

HARI VIDYA BHAVAN

A Hindi language and Indian culture school PO Box 1065, Bristol, RI 02809

HARI Vidya Bhavan serves all segments of the community and does not discriminate in any way on basis of race or color.

Registration 2012-2013, Fees: \$125 per semester, Checks payable to HARI Vidya Bhavan

Student Information

Stude	nt's Name:			
Stude	nt's age:	Grade entering Fall of this year:		
Date o	of Birth	Does Student speak Hindi at Home?	Yes No	
Mother's Name:		Father's Name:		
Addre	ss (Street, Town, Zip):			
Home	Phone (required):			
Mother's Mobile		Dad's Mobile		
Parent	t's Email (required):			
Child's	G e-mail (w/ Parent Permission for c	lirect communication from HARI) :		
Emerc	ency Contact			
Conta	ct name:			
Addre	ess:			
			 	
Medic	al Information			
Insurance Company:		Name of Insured:	Name of Insured:	
Docto	r's name and phone number: _			
Please	check appropriate			
	injury or illness. I grant them p	ers will take good care of my child but will not be held respons permission to provide necessary medical treatment by respons elease the Hindi Association of Rhode Island and the Brown U	ible medical authorities in	
	I want to have my child's name and school organizers.)	included in HARI directory. (Copies of directory will be provided	ded only to HARI families	
	I give HARI school permission	to use the student photographs for their school promotion (w	ebsites, brochures, etc),	
Date: _		Signature (Parent/Guardian):		