



# Khalsa Gurmat School



Email: wagurmatschool@gmail.com

Tel: 425-429-2226

www.khalsagurmatschool.org

School session: September 2017 – June 2018

For registration fees, make the check payable to  
**Khalsa Gurmat School**

**Previous Class (if any):**

**Enrolment ID:**

**Registering for Classes:**

- Gurmukhi & Gurmat
- Kirtan & Tabla
- Advanced Kirtan
- Creative Computing & Robotics
- Arts & Mathematics

**Please fill in all the information requested below**

<b>Child's Name:</b>	
<b>Date of Birth:</b>	(MM/DD/YYYY)
<b>Gender:</b>	
<b>Parent's Name:</b>	
<b>Address:</b>	
<b>Phone #:</b>	
<b>Cell #:</b>	
<b>Email Address:</b>	
<b>Emergency Contact:</b>	Name: Phone:
<b>Doctor's Name:</b>	
<b>Doctor's Phone:</b>	

I give permission for my child to join the Khalsa Gurmat School, in any of the activities or trips sponsored by the sewadars of the school. I hereby release them from responsibility and liability for any illness or injury that my child may sustain during this activity. In the event of an emergency, I hereby authorize an adult leader of this activity as agent for me, to consent to any x-ray examination, medical, dental, or surgical diagnosis, treatment, and hospital care advised and supervised by a physician, surgeon, dentist (as appropriate), licensed to practice under the laws of the state where services are rendered, either at a doctor's office or in any hospital. I expect to be contacted as soon as possible.

**I also understand the registration fees for the school are non-refundable and that I agree to respect and follow all the rules and regulations laid out in the Khalsa Gurmat School Parent Handbook.** This document will be valid and in full effect till the student continues to study at the Khalsa Gurmat School.

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Date: Mo/Day/Yr      Parent's Signature

For Office Use Only	Number of Students	Amount Received	Receipt Number	Received By	Level Assigned	Evaluated by