



Dharmapala Institute Sunday Dhamma School pre-enrollment form

Child's Name: _____

Child's Age: _____

Last grade completed in school: _____

Parent/Guardian Name: _____

Address: _____

(Street address

City

State

Zip code)

Phone: _____

(Home)

(Cell)

Email: _____

Medical / other information we need to know about your child (Please include any food allergies):

Emergency Contacts (other than listed above). At least two contacts shall be provided

Name

Phone number

Name

Phone number

Who may pick up your child at the end of each Dharma school day? _____

Does your child attend Sunday School currently? If so, where? _____

If your child is visiting DI regularly, whom is he coming with? _____

Does your child have basic knowledge of Buddhist practices? Yes. /No.

[Please complete the questionnaire form on the next page]

Please provide answers to ALL questions.

1. What are your expectations of the Sunday Dhamma school for your child?

2. What is your preferred frequency for the Dhamma School? **(please select only one)**
 - a. Once a month and no classes during summer
 - b. Twice a month and no classes during summer
 - c. Once a month all year
 - d. Twice a month all year

3. What is your preferred timing for the Sunday Dhamma School? **(please select only one)**
 - a. 2.00 – 3.30 PM
 - b. 3.00 – 4.30 PM
 - c. 9.30 –11.00 AM
 - d. 8.00 – 9.30 AM

4. Will you be thoroughly committed to bring your child on-time for all the classes, after the committee decides on one of the above picked out based on popular vote ?
 - Yes / No