



## CHINMAYA MISSION TRI-STATE CENTER

**Chinmaya Kedar**  
560 Bridgetown Pike  
Langhorne, PA 19053  
Tel: 215-396-0787

[chinmayavrindavan.org](http://chinmayavrindavan.org)

**Chinmaya Vrindavan**  
95 Cranbury Neck Road  
Cranbury, NJ 08512  
Tel: 609-655-1787

### Central New Jersey Bala Vihar/Study Group – Registration Form (Sept 2009 – June 2010)

Venue: Crossroads Middle School South  
195 Major Road, Monmouth Junction NJ 08852

Fall 2009 Start Date: Sept 13, 2009  
Timings: 10:00 AM – 12:00 Noon

Please **PRINT** Legibly and Complete **ALL** Sections Below.

Are you a New Member? YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, how did you hear about the Bala Vihar Program? WEBSITE <input type="checkbox"/> RADIO <input type="checkbox"/> NEWSPAPER <input type="checkbox"/> RELATIVE / FRIEND / NEIGHBOR <input type="checkbox"/> OTHER <input type="checkbox"/>		
Names of all adults in the family attending Study Group (or indicate if they are Bala Vihar volunteers)  <b>Please Note:</b> 1) At least one adult <b>must</b> be present during entire session, 10 am – 12 noon 2) No Cell Phone usage inside school	First and Last Name (Each Adult)		
Names of all children in the family attending Bala Vihar and their Grade in Regular School as of <b>Sept 2009</b> .  <b>Please Note:</b> <b>Pre KG kids are those starting KG in Sept 2010. ALL KIDS STARTING KG AFTER Sept 2010 MUST BE LISTED AS "TODDLERS".</b>	First and Last Name (Each Child)	Grade	Date Of Birth
Home Address with Zip Code Home Telephone Number and Mobile Telephone Number ( <b>both required</b> )	House Number, Street, Apt (if applicable)  City, State, Zip Code	Home Tel	Mobile
Email Addresses for (up to 2)	<input style="width: 100%;" type="text"/>		
Emergency Contact (the name listed here <b>must</b> be able to take care of your child at Bala Vihar in your absence)	Name	Home Tel	Mobile
<b>Annual Family Registration Dakshina</b> <b>Please select one membership level</b> <input type="checkbox"/> Regular (\$400 per family, per year) <input type="checkbox"/> Keystone Member* (\$1,000 per family, per year) sponsorship of CM Vrindavan Ashram Activities <b>Please make checks payable to CMTC</b>	<b>Regular members receive:</b> <ul style="list-style-type: none"> <li>Bala Vihar, Adult Study Circle, and Samskritam for the family</li> <li>Monthly Bala Vihar magazine</li> <li>Notification of upcoming CMTC programs</li> </ul>	<b>Keystone members receive Regular member benefits plus:</b> <ul style="list-style-type: none"> <li>Tapovan Prasad and Mananam publications</li> <li>Choose from one of the special pooja sponsorships for the welfare of your family:</li> </ul> <input type="checkbox"/> Ganesh Chaturthi <input type="checkbox"/> Rama Navami <input type="checkbox"/> Maha Shivaratri <input type="checkbox"/> Krishna Janmashtami	
* Requesting everyone to become a <b>Keystone Member</b> .			
We need your assistance to serve the community. Please check any/all areas below in which you can help so we may contact you:			
<input type="checkbox"/> Bring bhiksha for Swamiji to Chinmaya Vrindavan	<input type="checkbox"/> Prepare Prasad items for programs	<input type="checkbox"/> Book stall <input type="checkbox"/> Publicity	<input type="checkbox"/> Help prepare for Pooja (Flowers, Altar cleanup, etc. ) at Vrindavan ashram
<input type="checkbox"/> Teach <input type="checkbox"/> Attend Language class - specify language: <input type="checkbox"/> For Adults <input type="checkbox"/> For Kids		<input type="checkbox"/> Facility upkeep at Vrindavan ashram <input type="checkbox"/> Seva Projects / serving the needy	
<input type="checkbox"/> Office Support (e.g., Photocopying, etc.)	<input type="checkbox"/> IT support	<input type="checkbox"/> BV Teacher's Aide	<input type="checkbox"/> <b>Other - please specify:</b>
Questions and General Information	<a href="http://chinmayavrindavan.org">chinmayavrindavan.org</a> or call Vasava/Alka 609-933-1915 or Uma/Kasturi 732-821-6806		
Registrant's acceptance of guidelines shown on reverse side of this form <b>Registration must be signed and submitted in person at Crossroads</b>	I agree to follow the Bala Vihar participant's guidelines.		

**FOR OFFICE USE ONLY:** Received By: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Remarks: \_\_\_\_\_