

**OREGON BUDDHIST TEMPLE
DHARMA SCHOOL**

2024-2025 REGISTRATION FORM

Optional registration is \$25 per child (payable to OBT DS) with this registration/permission form for the year. We encourage families to take it upon themselves to ask questions and seek ways to become involved.

Child/Youth 1 NAME: _____ GRADE: _____ BIRTHDAY: _____

Child/Youth 2 NAME: _____ GRADE: _____ BIRTHDAY: _____

Special instructions for my child(ren), such as food allergies/restrictions/support:

Contact Information and Emergency Medical information:

Parent(s) /
Guardian(s):

Address:

Phone(s):

Email(s):

Medical
Insurance:

Doctor's name:

Phone number:

I understand that my family, including my child(ren) /youth(s) may participate and assist in Dharma School activities at the Oregon Buddhist Temple for the 2024-2025 year. Activities include learning about Jodo Shinshu Buddhist etiquette and teachings, providing snacks, youth choir practice and performance, and field trips outside of the temple. In addition, and in case of an emergency, I give permission for my child to receive medical treatment in an emergency.

Parent/Guardian signature

Date

PHOTOS: I give my permission to share photos (with first names only) of my child participating in OBT activities in the following formats with my initials:

Printed version of the temple newsletter. _____ OBT's social media. _____

OBT Dharma School or the Buddhist Churches of America printed calendar. _____

Submit Google form or print out and hand to Ann Shintani (care of OBT Dharma School).
