



**Vidyakendra of
THE HINDU COMMUNITY CENTER**
156 Schuyler Avenue · Kearny, NJ 07032 · (201) 997-5556
vkofcc@gmail.com



Lunch and Volunteer Form for 2018-2019

Family Last Name: _____ Father: _____ Mother: _____

Student Names: _____

The fees below are mandatory for all parents and payable in **CASH ONLY**.

Parents are required to volunteer a minimum of 3 times and if you do so the \$100 volunteer fee will be returned.

You will be asked to help with shopping for groceries, cooking, assisting teachers, etc.

PURPOSE	FEE
Lunch per family	\$125
Volunteer Commitment Fee	\$100
TOTAL	

DO NOT WRITE BELOW

VK Signature: _____

Date Received: _____

Volunteer Dates

Date Volunteer Fee Refunded: _____

Parent Signature: _____