



# DAKSHINI BENGALI ASSOCIATION OF CALIFORNIA

A Non-Profit Tax-Exempt Organization  
www.dakshini.org

## BANGLA SCHOOL VOLUNTEER REGISTRATION FORM

VOLUNTEER NAME: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PRIMARY PHONE NUMBER: \_\_\_\_\_

SECONDARY PHONE NUMBER: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

CHILD IN BANGLA SCHOOL: \_\_\_ YES \_\_\_ NO IF YES,

1<sup>ST</sup> CHILD'S NAME: \_\_\_\_\_

2<sup>ND</sup> CHILD'S NAME: \_\_\_\_\_

PLEASE TELL US WHAT AREAS OF BANGLA SCHOOL YOU ARE MOST INTERESTED IN HELPING WITH:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Person completing form: \_\_\_\_\_

Dated: \_\_\_\_\_