

EVENING QURAN CLASS REGISTRATION FORM

STUDENT INFORMATION	
First Name	
Last Name	
Age	Allergies?
Preferred Medium of Instruction	
PARENT/GUARDIAN INFORMATIO	DN .
Full Name	
Cell Phone	Home
Fmail	
EMERGENCY CONTACT INFORMA	TION (must be someone from another household)
FULL NAME	
CELL PHONE	
Email	
Relationship to student	
	and female: Knee length long dress, head covered at all times.
SIGNATURE OF PARENT/GUARDIAN:	FOR OFFICE USE ONLY:
DATE:	SUBMITTED WITH: GRADE: