



## Weekend Islamic School

### REGISTRATION FORM

ACADEMIC YEAR : 20\_\_\_\_ / \_\_\_\_

REGISTRATION #:

DATE:

#### SECTION A: Applicant's Information

Applicant's First Name										Last Name										M. Initial						
Date of Birth: (DD/MM/YYYY)																				MALE <input type="radio"/>			FEMALE <input type="radio"/>			
STREET NAME:															APARTMENT #											
CITY:										STATE:										POSTAL CODE:						
RES. PHONE:																										
CELL:																										
EMAIL:																										

#### SECTION B: Parents/Guardian's Information and Contact #

Name (First Name, Last Name)										Cell		
Mother												
Father												
Guardian												

#### SECTION C: Emergency Contact #

Name (First Name, Last Name)										Cell / Phone		
Contact 1												
Contact 2												

#### SECTION D: Medical Information

Do you have any medical conditions that may impact your study at AlManarat Academy or that may require attention while you are on campus? If so, what are they?

Health Card Number															Version Code		

#### SECTION E: Enrollment Agreement

*MUNICIPAL FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT : Personal information on this form is collected under the legal authority of the Education Act, R.S.O. 1980, c.129 and Health Card Numbers Control Act, 1991. This information will be used for the purposes of: processing student registration, production of student databases, student placement and referrals, statistical and reporting requirements by the Ministry of Education, program to students, contacting parent(s), guardian(s), etc., in case of emergency, and the disclosure of health related information to the Medical Officer of Health. Questions regarding this collection and use of personal information should be directed to the Administration Office.*

*\* I take full responsibility to enroll my Child at AlManarat Academy and I'm financially responsible for his/her fees and expenses.*

*\* I have read, understood and agreed to abide by AlManarat Academy's School Policy and Code of Conduct.*

#### SECTION F: Signature

APPLICANT/ PARENT / GUARDIAN'S SIGNATURE										DATE:		