

Summer Program 2011

Quran Academy Program Registration Form

Student Name _____
 Parents' Names _____
 Child's Age and Birth Date _____
 Address _____

 Home Phone _____
 Work Phone _____
 Cell Phone/Pager _____

Additional People Authorized to pick up your child:

Name	Relationship to you	Phone Number
_____	_____	_____
_____	_____	_____

Quran Classes held Monday – Thursday Only, June 6 through August 19

I want to register my child for (CHECK ALL THAT APPLY):

- ____ Daily Session 1 From 9am – 1pm (\$200 per month) (Teacher Sheikh Kamal)
- ____ Daily Session 2 From 1:30 pm - Asr (\$200 per month) (Teacher Hafiz Bashir and Br. Furqan)
- ____ Daily Session 3 From Asr - Maghrib (\$100 per month) (Teacher Hafiz Bashir)

PLEASE READ THE FOLLOWING AGREEMENT CAREFULLY:

I the undersigned understand this Summer Quran Academy will be held each **Monday through Thursday**, during June, July, and the first 3 weeks of August.

I understand I must pick my child on time each day!

If a child misses any classes the total fees are still applicable. No refunds will be issued.

Parents Signature _____ Date _____