



# Shalimar Islamic Centre Inc.

3024 Cedarglen Gate, Mississauga, ON, L5C 4S3

☎ 647.920.3024

Website: www.shalimarislamiccentre.ca

## REGISTRATION FORM

*(Evening Quran Class)*

### Student's Information

Name:

Date of Birth:

Phone:

Health Card Number:

Family Doctor:

Address: *(Street Name & Number)*

City:

Province/Postal Code:

**Student #**

Photo

### Parent's Information

Father's Name:

Mother's Name:

Address: *(Street Name & Number)*

Phone:

City:

Province/ Postal Code:

E-✉ address:

### Emergency Contact

Name:

Relationship:

Address: *(Street Name & Number)*

Phone:

City:

Province/ Postal Code:

E-✉ address:

Parent's Signature

Head Teacher

Date

<b>Fees</b>			
<b>1<sup>st</sup> Child</b>	<b>2<sup>nd</sup> Child</b>	<b>3<sup>rd</sup> Child</b>	<b>Additional Children</b>
\$45	\$40	\$35	\$35

**(Note)** All Fees must be paid in full by the first week of every month.

### **Rules & Regulations**

1. Please paste/attach student’s recent photograph.
2. A copy of student’s valid Heath Card is required at the time of registration.
3. All the students must maintain discipline at all times.
4. Every student must observe appropriate dress code. It is mandatory that every child’s head is covered during the School.
5. Shalimar Islamic Centre will not be held responsible for any kind injury caused due to misuse.
6. Students will be held responsible for any damage caused to Shalimar Islamic Centre due to their misuse.
7. Every student must strictly adhere to the class timings. Shalimar Islamic Centre is not responsible outside of class hours.

**Contact Information**  
 Imam Abdulrahim Al-Janabi **(For Boys)**  
 Sister Rashida Salman **(For Girls)**  
 ☎ 647.920.3024

As a parent, I understand and agree that Shalimar Islamic Centre, while taking all reasonable precautions to ensure the safety of students, will not be held liable by me (us) in the event of personal injury or accident caused to child while he is at school or on a school trip. In addition, I have also read, understand and agree to abide by the stated above rules and regulations of Shalimar Islamic Centre.

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**Parent’s Signature**

**Head Teacher**

**Date**