

IN THE NAME OF ALLAH THE MOST BENEFICENT THE MOST MERCIFUL



مدرسة البنات المسلمات

MADRESATUL BANAAT ALMUSLIMAAT

10 Vulcan St., Etobicoke, ON M9W 1L2

TEL: (416) 244-8600 • FAX: (416) 244-0059

REGISTRATION FORM

INSTRUCTIONS

- **Register only ONE child per form**
 - **Attach the following documents to the completed registration form:**
 - **A copy of the student's birth certificate or other source of verification**
 - **The student's record of immunization**
 - **Two passport size photos taken recently**
 - **A copy of the student's last report card from the last school attended (Gr. 6-8 students only) or**
A copy of the student's latest transcript from the last school attended (Gr. 9-12 students only)
 - **Complete the form in its entirety to ensure the student is properly registered**
 - **Bring completed registration form, registration fee and first month's tuition fee to the school in person**
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www.muslimgirlsschool.com

SECTION 1 STUDENT INFORMATION (PLEASE PRINT)		
Last Name	Middle Name	First Name
Complete Address		
Date of Birth (yyyy/mm/dd)	Country of Birth	Date of Arrival in Canada
Registration for Grade: <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12		
Father's Name	Tel. Home	Tel. Work
Mother's Name	Tel. Home	Tel. Work
Student lives with: <input type="checkbox"/> Both parents <input type="checkbox"/> Mother only <input type="checkbox"/> Father only <input type="checkbox"/> Guardian		
Guardian's Name	Tel. Home	Tel. Work
SECTION 2 EDUCATION HISTORY		
Name of Last School Attended	Last Grade Completed	
School Address	Tel. No.	
SECTION 3 MEDICAL INFORMATION		
Family Doctor	Tel. No.	
Student Health Card Number		
Please list any health problems and/or special needs the student may have (i.e. allergies, asthma, inhaler)		
In case of an emergency, the school should contact:		
Name	Relationship to Student	
Address	Tel. No.	
Please sign and date your registration form below before submitting to Madresatul Banaat Almuslimaat. Jazak Allah Khair.		
Parent Signature	Date (yyyy/mm/dd)	
SECTION 4 FOR OFFICE USE ONLY		
Student	Grade	Student Number
<input type="checkbox"/> Registration fee paid in full <input type="checkbox"/> First month's tuition fee paid in full <input type="checkbox"/> Copy of birth certificate attached	<input type="checkbox"/> Immunization record attached <input type="checkbox"/> 2 passport size photos attached <input type="checkbox"/> Copy of last report card/transcript attached	Date (yyyy/mm/dd)