

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

Email: muslimgirlsschool@yahoo.com

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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SECTION 1 STUDENT INFORMATION (PLEASE PRINT)		
Last Name:	Middle Name:	First Name:
Complete Address:	Parents Email Address:	
	Student Email Address:	
Date of Birth (yyyy/mm/dd): <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8	Country of Birth: <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Date of Arrival in Canada:
Registration for Grade:		
Father's Name:	Tel. Home/Cell:	Tel. Work:
Mother's Name: <input type="checkbox"/> Both parents <input type="checkbox"/> Mother only <input type="checkbox"/> Father only <input type="checkbox"/> Guardian	Tel. Home/Cell:	Tel. Work:
Student lives with:		
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)