

Evening Class-Registration Form 2019-2020

Parent/Guardian Information:

Father/Guardian's First Name: _____ Last Name: _____

Mother's First Name: _____ Last Name: _____

Home Address: _____ Apt. Num.: _____

City: _____ Province: ON Postal Code: _____

Email: _____

Home Phone Number: _____ Cell Number: _____

Emergency Contact Information: (other than above individuals)

First Name: _____ Last Name: _____

Relationship to student: _____ Contact Number: _____

Students' Information:

1) First Name(s): _____ Last Name: _____

Gender: Male Female Current Age: _____ Day school attended: _____

2) First Name(s): _____ Last Name: _____

Gender: Male Female Current Age: _____ Day school attended: _____

3) First Name(s): _____ Last Name: _____

Gender: Male Female Current Age: _____ Day school attended: _____

Medical Problems (Allergies/illnesses/medication): _____

Method of Payment:

ICC Evening school fee structure is divided into 3 semesters. Each Semester is 3 months long and costs \$105 for the first child and \$90 per sibling

Pre-authorized payment Plan

Available: Monthly (\$35/month for first child and \$30/month for the second child)

I understand and affirm that:

- **I will punctually pick up/drop off the student(s) on the appropriate time. I affirm there will be no supervision before or after class hours.** The Islamic Centre of Cambridge staff will not be held responsible for any accidents that may occur.
- I (parent/guardian) will be responsible for any item or equipment loaned to my child and I will pay for loss or damage.
- A nominal monthly tuition fee of **\$35.00** per child is due by the 1st day of each month
- I have read and agree with the terms and conditions for admission of my child and I verify the above information is correct.

Parent/Guardian Name: _____

Signature: _____

Date: _____