



(A Non- profit Organization | Tax ID # 811585350)

## RULES AND REGULATIONS OF ISLAMIC CLASSES

Student Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

1. Admission to Islamic classes will be accepted during registration period.
2. Weekend Islamic Class (Saturday-Sunday) will be held 10:00 am – 1:00 pm. Monthly fee is \$50.
3. Summer Islamic class (July and August) will be held (Monday to Thursday) from 10:00 am to 2:00 pm. Course fee is \$150.
4. Full Time Hifzul Quran Class with NYC Board of Education Approved Academic curriculums, classes will be held Monday to Friday from 9:00 am to 5:00 pm.
5. Full Time Hifzul Quran Class Fee \$400 per month plus \$200 admission fee due with first month fee Course fee due at time of registration (1st Grade to 8th Grade).
6. After School Islamic Class with School Homework, classes will be held Monday to Friday from 5:00pm to 8:00 pm, Fee \$150 per month (1st Grade to 8th Grade).
7. After School Islamic classes will be held Monday to Friday from 5:00pm to 7:00 pm, Fee \$100 per month (1st Grade to 8th Grade).
8. Fees are required one month in advance at the time of admission as well as beginning of the month.
9. Monthly fee should be paid in the first week of each month. Defaulter for 2 months fees, students will be terminated from the class on beginning week of the following 3rd month.
10. Respective parents/guardians will be fully responsible for the drop off and pick up of their children on time.
11. Any misconduct by student will be notified to the parents/guardians for necessary action.
12. Any changes of the rules and regulations will be informed to the parents promptly.
13. When a student is absent three days during the summer classes, he or she will be discharged from the course.

By signing below, I \_\_\_\_\_ agree to the terms and  
(Full Name) (Relation to Student)

Conditions set forth by the management of **Daarul Hikmah New York**.

Parent/Guardian Signature: X \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Principal Signature: X \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



## STUDENT REGISTRATION FORM

Reg. NO: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

- ☐ Weekend Classes: 20\_\_\_\_  
☐ Summer Classes : July- August 20\_\_\_\_

### STUDENT INFORMATION:

First Name: \_\_\_\_\_ M.N: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_ Apt# \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### PARENT/GUARDIAN INFORMATION:

First Name: \_\_\_\_\_ M.N: \_\_\_\_\_ Last Name: \_\_\_\_\_

Telephone: HOME: \_\_\_\_\_ BUISNESS: \_\_\_\_\_ CELL: \_\_\_\_\_

Email: \_\_\_\_\_

### EMERGENCY CONTACT:

Name: \_\_\_\_\_ Home: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

### PICK UP INFORMATION:

1) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

2) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Parents/ Guardian Signature: X \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Office Use Only

### Payment Information

Registration Fee	\$
Monthly Tuition Fee (Weekend)	\$
Summer Tuition Fee	\$
Books	\$
Total	\$

### Level of Learning

Level 1: \_\_\_\_\_

Level 2: \_\_\_\_\_

Level 3: \_\_\_\_\_

Level 4: \_\_\_\_\_

Other : \_\_\_\_\_

Principals Signature: X \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_