

Emergency Contact

Role as guardian (Cousin etc.)

First Name:

Extra contact information (Email, Fax).

Last Name:

Full Address.

Phone
Number:

Medical Information

State any medical conditions such as allergies, disorders or dietary needs:

Does your child have any special arrangements at school?

Previous Madrasah Details

Name of Madrasah (if applicable):

Reason for leaving:

Previous Education:

Nothing ☐

Qaa'idah
Partial ☐

Qaa'idah
Completed ☐

Holy Qur'aan
Reading ☐

(how many paaras
if so)

Islamic Studies
(Du'as, Fiqh, Hadeeth, Aqaa'id etc.):

Guardian Declaration

If the above child is accepted for admittance, then I, the undersigned, promise to guide my child to abide by the rules and regulations set out by [\[your organisation\]](#)

Date:

Guardian Signature:

[\[Organisation\]](#) Use Below:

Admission Date:

Class:

Validated By: