



# Islamic Center of the East Valley

## Qur'an Class Student Enrollment Form



PLEASE USE CAPITAL LETTERS TO WRITE

(Please use this page to enter all the children in family.)

### Student Information

First	Last	Birth date	Age	M/F	Choose Session
					1A / 1B / 2A / 2B

(Please use separate form for HIFZ CLASS)

Any allergies: \_\_\_\_\_ Name(s): \_\_\_\_\_

Parent Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Parent Home Phone: \_\_\_\_\_ Parent Cell Phone: \_\_\_\_\_

Any other emergency contact: Name \_\_\_\_\_ Phone \_\_\_\_\_

I understand that my monthly tuition \$\_\_\_\_\_ will be automatically deducted from my bank account on 7th of each calendar month, and I will be subjected to \$35 fee for any failed payment. Also I will need to give advance written notice to stop the payment when I withdraw my child(ren).

**FINANCIAL ASSISTANCE NEEDED: Yes / No. (If yes, please attach proof of income)**

(Financial assistance decision will be made by administration. Teachers will not approve the requests.)

I give the ICEV the permission to call emergency medical services and render appropriate medical treatment to my child(ren) if needed.

I hereby hold ICEV, its staff and volunteers harmless from any and all claims of liability and acknowledge and accept the admission process and guidelines. So help me Allah.

\_\_\_\_\_  
Parent/Guardian Full Name (Use UPPER CASE LETTERS) Signature Date

**PLEASE SUBMIT A VOID CHECK FOR MONTHLY TUITION DEDUCTION FROM BANK ACCOUNT.**

One time Registration Fee \$20/child	Class Hours (Non-Hifz Students)			Monthly Fee
	Mon-to-Thu	Session 1A	4:30 to 6:00 PM	\$45/child \$40 each additional child
		Session 1B	6:00 to 7:30 PM	
	Sat & Sun	Session 2A	1:00 to 3:00 PM	\$35/child \$30 each additional child
Session 2B		3:00 to 5:00 PM		

Book Fee: \$10 per Arabic reading book. \$5 per Duaa book.

**FOR OFFICE USE ONLY:** (Parents please do not write in this section)

No. of children: \_\_\_\_\_ (Note: VOID Check must have printed name and address.)

Voided check: yes/no. \$ \_\_\_\_\_ per month.

Registration fee received: \$ \_\_\_\_\_, Check # \_\_\_\_\_ / Cash / Auto-deduct on first month

Reading book(s) issued: \_\_\_\_\_; Duaa book(s) issued: \_\_\_\_\_; Total book fee received \$ \_\_\_\_\_

Serial No. \_\_\_\_\_ Enrollment Processed: \_\_\_\_\_ Payment Processed: \_\_\_\_\_

Form Received Date \_\_\_\_\_ Received by: \_\_\_\_\_ Reviewed by: \_\_\_\_\_