

In The Name of Allah, Most Merciful, Most Compassionate

ISLAMIC SCHOOL OF SILICON VALLEY

2018-2019 Pre-Registration Form

PLEASE PRINT LEGIBLY IN INK WHEN COMPLETING THIS FORM.

FIELDS HIGHLIGHTED IN YELLOW ARE REQUIRED.

Father's Last Name:	Mother's Last Name:
Father's Name:	Mother's Name:
Street Address:	Street Address: (if different)
City:	City:
Zip Code:	Zip Code:
Home Phone #(1):	Home Phone #(2):
Father's E-mail Address:	Mother's E-mail Address:
Father's Work Phone #:	Mother's Work Phone #:
Father's Cellular #:	Mother's Cellular #:

VERY IMPORTANT: Please list one email for all School communications.

Please enter the month and year of your family's first association with the school.

Emergency Contact Name & Phone#:	Emergency Contact Name & Phone#:
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<u>Child(ren)'s First Name and Last Name</u>	<u>Birth Date</u>	<u>Male / Female</u>	Current Grade in Islamic School	Regular School Grade in Fall 2018	Grade Registering Fall 2018	New Student (Yes/No)

Registration fee is \$470 a year for the first child and \$420 a year for each sibling(s).

(Continued on back)

PLEASE NOTE: Should you require financial assistance then please indicate below appropriately. Additionally, please complete and return the financial aid assistance form separately. Please note: Financial Aid information is held in strict confidentiality.

Full Assistance: _____

Partial Assistance: _____

Does your child require any special needs at regular school or any food allergies that we should know about?

(Yes/No)

If yes, please explain:

Listing of Home Address, Home Phone Number and Home Email Address in the School Directory?

(Yes/No)

Permission to take Child's Picture.

(Yes/No)

Registration does not guarantee placement in a particular grade. Students are normally placed according to their age. However students who do not meet schools academic requirements will be held back to repeat their grade.

REFUND POLICY:

August 19, 2018 is the last day to claim refund of fees; however, school will deduct \$50 per child from paid fees. Please note that no refund will be given beyond August 19, 2018. Child(ren) pulled out are not eligible for re-admission until the following year.

I agree to abide by all school rules and regulations. I understand that the school cannot be held responsible or liable for any kind of damages.

Signature: _____

Date: _____

PLEASE DO NOT WRITE BELOW THIS LINE

<u>INSTALLMENTS</u>	<u>DATE OF PAYMENT</u>	<u>CASH/CHECK #</u>	<u>AMOUNT</u>	<u>RECEIPT #</u>
<u>First installment</u>				
<u>Second installment</u>				

COMMENTS:

