



Madresa Anwarul Islam of Malton

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RELIGIOUS SCHOOL – REGISTRATION FORM

Please select the course you are registering for by marking a check mark in the box beside it:

- | | |
|---|--|
| (1) Full Time Hifz (Grade 4 – 7) | (5) Part Time Alim/Alimah – (Grade 8+) |
| (2) Evening Madrasah – Session 1 (Age 5 – 14) | (6) Tajweed Program |
| (3) Evening Madrasah – Session 2 (Age 5 – 14) | (7) Youth Program (Grade 9+) |
| (4) Part Time Hifz – (Grade 4 – 7) | (8) Summer Camp (SK – Age 12) |

PARENT/GUARDIAN INFORMATION

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

Phone #: _____ E-Mail: _____
Home Phone Number Cell Phone Number

Mother's Last Name: _____ Mother's First Name: _____

Phone #: _____ E-Mail: _____
Home Phone Number Cell Phone Number

Address: _____
(Apt. No) (Number and Name of Street) (City) (Province) (Postal Code)

EMERGENCY CONTACTS INFORMATION (OTHER THAN PARENT/GUARDIAN)

Name: _____ Relationship with the student: _____

Phone#: _____ E-Mail: _____
Emergency Number # 1 Cell Phone Number

STUDENT REGISTRATION DETAILS

#	Student Name Last Name, First Name	Date of Birth	Age	Gender M/F	School Grade	Previous Islamic Education Where and Portion Completed
1						
2						
3						

ALLERGIES

FOR OFFICE USE ONLY

PARENT FID	STUDENT's FID #		
	Student 1	Student 2	Student 3

MONTHLY FEES STRUCTURE

<input type="checkbox"/>	(1) FULL TIME HIFZ – (Grade 4 – 7), Hours: 8am – 3:30pm, Monday – Friday)			
	1 Student	2 Students	3 Students	4 or More Students
Monthly	\$250	\$500	\$750	\$200 per extra child
<input type="checkbox"/>	(2) EVENING MADRASAH – Session 1 (Age 5 – 14), Hours: 4pm – 6pm, Monday – Friday)			
	1 Student	2 Students	3 Students	4 or More Students
Monthly	\$50	\$100	\$150	\$30 per extra child
<input type="checkbox"/>	(3) EVENING MADRASAH – Session 2 (Age 5 – 14), Hours: 6pm – 8pm, Monday – Friday)			
	1 Student	2 Students	3 Students	4 or More Students
Monthly	\$50	\$100	\$150	\$30 per extra child
<input type="checkbox"/>	(4) PART TIME HIFZ – (Grade 4 – 7), Hours: 5pm – 8pm, Monday – Friday)			
	1 Student	2 Students	3 Students	4 or More Students
Monthly	\$95	\$190	\$285	\$60 per extra child
<input type="checkbox"/>	(5) PART TIME ALIM/ALIMAH – (Grade 8+), Hours: 5:15pm – 8pm, Monday – Friday)			
	1 Student	2 Students	3 Students	4 or More Students
Monthly	\$85	\$170	\$255	\$50 per extra child
<input type="checkbox"/>	(6) TAJWEED PROGRAM – (Age 5 – Youth), Hours: 10am – 12pm, Weekends)			
	1 Student	2 Students	3 Students	4 or More Students
Monthly	\$25	\$50	\$75	\$15 per extra child
<input type="checkbox"/>	(7) YOUTH PROGRAM – (Grade 9+), Hours: GIRLS – 6pm – 7:30pm (Tuesday, Friday), BOYS – 6pm – 7:30pm (Tuesday), 11am – 1pm (Sunday)			
	1 Student	2 Students	3 Students	4 or More Students
Monthly	FREE	FREE	FREE	FREE
<input type="checkbox"/>	(8) SUMMER CAMP – (SK – AGE 12), Hours: 10am – 2pm, Monday – Thursday)			
	1 Student	2 Students	3 Students	4 or More Students
Monthly	\$100	\$200	\$300	\$100 per extra child

REGISTRATION FEES STRUCTURE

<input type="checkbox"/>	COURSES (1 - 5)			
	1 Student	2 Students	3 Students	4 or More Students
One time	\$40	\$80	\$120	\$40 per extra child

PLEASE SELECT ONE OF THE FEE PAYMENT OPTIONS BELOW:

Note: Registration will only be accepted upon completion of monthly, one time registration fees payment options and completed form (No monthly cash payments).

- Already enrolled on monthly Pre-authorized Fee Payment Plan
- Pre-Authorized Fee Payment Plan (Please attach a void cheque)
- Full payment of fees on signing this form

Pre-Authorized Consent

1. I (we) agree to authorize the Anjuman-E Anwarul Islam of Malton to withdraw from my (our) account in the amount selected above and that the Financial Institution is not required to verify that the payments are drawn in accordance with this authorization, including the amount and the frequency.
2. I (we) agree that delivery of this Authorization to Anjuman-E Anwarul Islam of Malton constitutes delivery by me to the branch of the financial institution at which I maintain an account.
3. I (we) agree to inform the Anjuman-E Anwarul Islam of Malton, in writing, of any changes in the account information two weeks prior to the next due date of the pre-authorized debit.
4. I (we) agree with the duration of my (our) payment to be automatically withdrawn from my (our) bank account on the 15th of every month.
5. I (we) understand that I (we) will be responsible for any costs that may be incurred to return, cancel, recall or stop payment on this pre-authorized transfer. I (we) warrant that all persons whose signatures are required to sign on the account have signed this authorization below.

I (we) read, understood and will abide by the terms and conditions.

Tuition Fees Policy

1. Despite your child being absent from Madresa for any reason(s), his/her tuition fee will continue to be withdrawn. By doing this, your child's place will be kept in the Madresa.
2. If you decide NOT to continue your child's tuition fee, then there is no guarantee of his/her place in the Madresa upon his/her return. Unfortunately, your child's name will be removed from the Madresa, and his/her place will be filled by another child who is on the waiting list.
3. New registered student(s) must pay his/her tuition fee using the pre-authorized method.
4. In the case that your child's tuition fee is returned from the bank for any reason(s) not by the management, the returned fee will be added to the following month without any prior notice. After two unsuccessful attempts, parents/guardians will be contacted. If problem persists, management will be notified for further action.
5. If you wish to remove your child from the Madresa (no longer continue studies at our Madresa), then you must fill out the withdrawal form and hand it over to the Masjid office 30 days prior to his/her last date of attendance. This will provide sufficient time the financial team to make a necessary adjustment in your account.

I (We) read, understood and will abide by the Tuition Fees Policy.

If you have, any concerns/queries regarding your pre-authorized account, kindly contact the Masjid office at the contact information above.

Signature(s) of Parent or Guardian

Parent or Guardian's Name(s) (Please Print)

(DD/MM/YY)

FOR OFFICE USE ONLY

Date Received: ____/____/____
 DD / MM / YY

Received by: _____

Parent FID: _____

Receipt # for Registration Fees: _____

Admission Date: ____/____/____
 DD / MM / YY