



Registration Form for 2017-2018 School Year (Sunday, September 10, 2017 – Sunday, May 20, 2018)

Parent's Name: _____ Phone: _____

Address: _____

E-mail: _____ Emergency Contact: _____

Student's Name: _____ Grade: _____

Date of Birth (MM/DD/YYYY): ____/____/____ Allergy Concerns: _____

Student's Name: _____ Grade: _____

Date of Birth (MM/DD/YYYY): ____/____/____ Allergy Concerns: _____

Student's Name: _____ Grade: _____

Date of Birth (MM/DD/YYYY): ____/____/____ Allergy Concerns: _____

No Liability Waiver: Apex Mosque, Al Ihssan Sunday School, and its Management and Staff assume no responsibility whatsoever for any injury that may occur to students during school session including break time. I, the undersigned _____ Parent of student(s) _____ acknowledge the receipt of the Al Ihssan Sunday School No Liability Waiver on ____/____/____

For Office Use Only

Student	Registration fees*	Tuition	Total Balance	First Payment Due: Sep 30 2017	Second Payment Due: Feb 4 2018	Cash /Check	Office use
1	\$50.00	\$325.00	\$375.00	\$188.00	\$187.00		Date: ____/____/____ Signature _____
2	\$50.00	\$300.00	\$725.00	\$362.00	\$363.00		Date: ____/____/____ Signature _____
3	\$50.00	\$275.00	\$1050.00	\$525.00	\$525.00		Date: ____/____/____ Signature _____
4	\$50.00	\$250.00	\$1350.00	\$675.00	\$675.00		Date: ____/____/____ Signature _____

*Registration fee is due on registration day and is nonrefundable.