Parents are encouraged to sign up for					
one of the following activities					
Lunch Coordinator					
Teacher					
Newsletter Coordinator					
Sunday Event Coordinator					

Student Registration Form Weekend Islamic School in Tallahassee (W.I.S.T) Islamic Center of Tallahassee – Masjid Al-Furqan 3617 Old Bainbridge Road, Tallahassee, Florida 32303 http://www.ictlh.org

Check one box for the enrollment - Fall - Spring / Summer Program (Please complete one form per hous Today's Date:										
Father/Guardian:	First Name									
	First Name	Last Name	Cell Phone							
Mother/Guardian:	First Name	L 4 No	Call Diama							
	First Name	Last Name	Cell Phone							
Home Phone:	ome Phone: Emergency Contact Number (during school hours):									
Email Addresses:										
Street:										
City:		State:	Zip:							
Note: (Please inform u. Preferred Hospital Nar		edical problems, allergies or Physician's Name	or special needs of your child)							
Tallahassee to obtain a children in case of any	qualified person, injury to sicknes	, physician or a hospital or s s during the school. I do here	I below. I also authorize the Weekend Islamic School such medical care as necessary for the welfare of my reby waive any rights or claims against the School; the ne Shuraa Council, Board of Trustees, and/or voluntee							
free. One time regis lunch. Summer pro	stration fee for e ogram fees may	each child is \$25/child to c vary due to the nature of a	d \$35, 3rd child \$30, 4th child \$25, and rest are cover the cost of teaching material and weekly activities. <i>Financial Assistance available</i> , as out to W.I.S.T. Note: No Refunds are provided.							

Signature

Date

	Student's Name	Date of Birth Month/Day/Year	Male or Female	Returning Student	Public School Grade	Fees+Registration		
1				Yes / No				
2				Yes / No				
3				Yes / No				
4				Yes / No				
5				Yes / No				
Total (Fees + Registration):								