



MASJID FRESNO مسجد فرزنو

The Islamic Center of Central California www.MasjidFresno.org
 2111 East Shaw Avenue Fresno, Ca 93710 (559)222-6686

Saturday School Registration Form

Please fill out one form per family

Parent/Guardian _____

Address _____

City _____ State _____ Zip Code _____

Home phone # _____ Cell phone # _____

E-mail address _____

Student's information:

	Student Name	Date of Birth	Age	Gender	Grade
1					
2					
3					
4					

I affirm that the above information is complete and correct. I understand that Masjid Fresno Saturday School is not responsible for any injuries or loss of property that the registrant may incur while at school. In case of an emergency in which I cannot be concted, I authorize the administration to seek medical attention and/or administer any needed emergency procedures for the registrant.

Student's Medical Insurance _____

Emergency contact _____ Phone # _____

Special instructions _____

Signature of Parent /Guardian: _____ Date: _____

Masjid Fresno Saturday School Tuition: \$60.00 per student per month, \$100.00 for two students, \$140.00 for three students, and \$30.00 for more additional students.

FOR OFFICE USE ONLY:

#	Payment Date	Payment Type	Payment Amount	School Official - Name & Signature - Received By
1		Check Cash	\$.00	
2		Check Cash	\$.00	
3		Check Cash	\$.00	
4		Check Cash	\$.00	
5		Check Cash	\$.00	
6		Check Cash	\$.00	
7		Check Cash	\$.00	
8		Check Cash	\$.00	
9		Check Cash	\$.00	