

SUMMER SCHOOL REGISTRATION FORM

Please fill out one form per family

Parent / Guardian			
Address			
City	State		Zip Code
Home phone #		Cell phone #	• <u> </u>
Email 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 Summer School is not responsible for any injuries or loss of property that the registrant may incur while at school. In case of emergency which I cannot be contacted, 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 Summer School Tuition: \$130 per student per entire course, \$220 for two students,						
\$350 for three students or more.						
#	Payment Date	Payment Type	Payment Amount	School Official		
1	/ /	Check / Cash	\$			