

# Pickering Islamic Centre

## Winter Break Program 2009

### Registration Form

#### Student Information

#	Last name	First name	Phone # & email *optional	Fee	Dob dd/mm/yy	Grade
1						
2						
3						

#### Guardian Information

#	Name	Phone # & e-mail	Street #	City	Postal Code
1					
2					

#### Emergency Contact Info if different than Guardian

Name:	Telephone:
Doctor's Name:	Tel. No.

All attendees will be required to bring their own Quran/Qaidah, stationary and lunch/snacks (accept for Thursday's when Lunch will be provided)

Pickering Islamic Centre is not responsible for any injuries or mishaps on and off the premise. All students are required to be dropped off and picked up on time.

Guardian Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

#### Office Use Only

Method of Payment:  cheque      Cash

Received/approved by      Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Extra Notes/Remarks \_\_\_\_\_