

Summer Programs 2017 – Registration Form

6401 Independence, Plano, TX 75023, Phone: (972) 491-5800. email: QuranicEducationTeam@gmail.com

RETURNING Student

NEW Student
 One Time Registration Fee: \$25 per child

Refer to Summer School flyer for more details

Date: _____

PROGRAMS & FEES

Summer School (MON-THU)	PT-Hifz	Arabic (MON-THU)	Naazirah (MON-THU)
Session 1 (July 3-July 31): \$150	4 days (Mon-Thu): \$250	Beginner (2pm-3pm) OR Intermediate (3pm-4pm): \$150	2pm 3pm 4pm 5pm
Session 2 (Aug. 1-Aug. 17): \$150	6 days (Mon-Sat): \$300		\$150

STUDENT(S) INFORMATION

#	Name (First, Last)	Summer Programs Enrollment			
		Summer School	PT-Hifdh	Arabic Language	Naazirah
1		<input type="checkbox"/> Session 1 (July 3-July 31) <input type="checkbox"/> Session 2 (Aug. 1-Aug. 17)	<input type="checkbox"/> PT-Hifz (4 Days/Mon-Thu) <input type="checkbox"/> PT-Hifz (6 Days/Mon-Sat)	<input type="checkbox"/> Arabic Beginner <input type="checkbox"/> Arabic Intermediate	<input type="checkbox"/> Naazirah 2pm-3pm <input type="checkbox"/> Naazirah 3pm-4pm <input type="checkbox"/> Naazirah 4pm-5pm <input type="checkbox"/> Naazirah 5pm-6pm
2		<input type="checkbox"/> Session 1 (July 3-July 31) <input type="checkbox"/> Session 2 (Aug. 1-Aug. 17)	<input type="checkbox"/> PT-Hifz (4 Days/Mon-Thu) <input type="checkbox"/> PT-Hifz (6 Days/Mon-Sat)	<input type="checkbox"/> Arabic Beginner <input type="checkbox"/> Arabic Intermediate	<input type="checkbox"/> Naazirah 2pm-3pm <input type="checkbox"/> Naazirah 3pm-4pm <input type="checkbox"/> Naazirah 4pm-5pm <input type="checkbox"/> Naazirah 5pm-6pm
3		<input type="checkbox"/> Session 1 (July 3-July 31) <input type="checkbox"/> Session 2 (Aug. 1-Aug. 17)	<input type="checkbox"/> PT-Hifz (4 Days/Mon-Thu) <input type="checkbox"/> PT-Hifz (6 Days/Mon-Sat)	<input type="checkbox"/> Arabic Beginner <input type="checkbox"/> Arabic Intermediate	<input type="checkbox"/> Naazirah 2pm-3pm <input type="checkbox"/> Naazirah 3pm-4pm <input type="checkbox"/> Naazirah 4pm-5pm <input type="checkbox"/> Naazirah 5pm-6pm
4		<input type="checkbox"/> Session 1 (July 3-July 31) <input type="checkbox"/> Session 2 (Aug. 1-Aug. 17)	<input type="checkbox"/> PT-Hifz (4 Days/Mon-Thu) <input type="checkbox"/> PT-Hifz (6 Days/Mon-Sat)	<input type="checkbox"/> Arabic Beginner <input type="checkbox"/> Arabic Intermediate	<input type="checkbox"/> Naazirah 2pm-3pm <input type="checkbox"/> Naazirah 3pm-4pm <input type="checkbox"/> Naazirah 4pm-5pm <input type="checkbox"/> Naazirah 5pm-6pm

PARENT INFORMATION

#	Name (First, Last)	Cell Phone	Email	Emergency Contact
Father				Name: _____
Mother				Phone: _____

Office Use Only:

	<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card	Amount Paid: _____
		Check#/Credit Card# : _____

Notes

Disclaimer
 I, hereby, release the IACC Summer School, its agents, affiliates, partners, teachers, and volunteers of all liabilities of any possible injury to my child(ren) on or off the Masjid premises.

Parent Signature : _____