

Student Enrolment Form 2009-2010

Please fill the yellow boxes
and cross the appropriate notes in **red** only

| | | | | |
|---|--|---------------------|------------------------|--------------------------|
| Application Date | / / 200 | | Reference No. | / |
| Father Name | | | Occupation | |
| Mother Name | | | Occupation | |
| or Guardian Name | | | Relation | |
| Language Spoken at home | | Cultural Background | | |
| Address | | | | |
| | | | | Post Code |
| Email Address | | | | |
| Home No. | | Mobile No. | | |
| Emergency Contact No.: | | Name & Relation | | |
| GP Name | | | GP Tel. No. | |
| GP Address | | | | |
| | | | | GP Postcode |
| Student Name | | | إسم الطالب الثلاثي | |
| | | | Date of Birth | |
| Sex | F | M | Arabiya Class | Place of Birth |
| Name of School | | | Year | |
| School Address | | | | |
| UCI | | | School Post Code | |
| Attending Qura'anic Classes in different School, <Yes> <No> | | | Details | |
| Attending Arabic Classes in different School, <Yes> <No> | | | Details | |
| Sport to be attended | <input type="checkbox"/> | Football | Creativity Interest | <input type="checkbox"/> |
| | <input type="checkbox"/> | Basketball | | Anasheed, Poem, Play |
| | <input type="checkbox"/> | Volleyball | | Calligraphy |
| Other sport's interest | | | other talents/interest | DIY Skills |
| Medical Conditions | | | | |
| Symptoms/Treatment | | | | |
| Additional Notes | As part of our school promotion sometimes we need to display photographs of our activities, can we use photographs with your child in it. (Please delete as appropriate) | | | |
| | Yes Signature | | | |
| | No | | | |