

United Muslim Weekend School

School Year: 2019-2020
Registration Form ::

For OFFICE use only:	
Excel Line: _____	
Date Regd.: _____	

PARENT INFORMATION: Please use UPPER CASE only. Write legibly.

Father's Name: _____

Mother's Name: _____

Address: _____

City _____ Zip: _____

Phone #: _____ **Cell:** _____

Email Address: _____

STUDENT INFORMATION as of September 2019: Please use UPPER CASE only.

Name: _____ Male / Female _____

Date of Birth: _____ Age: _____

Name of Regular School: _____ Grade: _____

Name: _____ Male / Female _____

Date of Birth: _____ Age: _____

Name of Regular School: _____ Grade: _____

Name: _____ Male / Female _____

Date of Birth: _____ Age: _____

Name of Regular School: _____ Grade: _____

Name: _____ Male / Female _____

Date of Birth: _____ Age: _____

Name of Regular School: _____ Grade: _____

Office use:

IS _____

AR _____

QR _____

IS _____

AR _____

QR _____

IS _____

AR _____

QR _____

IS _____

AR _____

QR _____

Do not write below this line

For office use only

Mode of Payment: Paid Entire Year / Post-Dated Checks / Credit Card / Auto Deduction / Other Monthly Tuition: _____

CC / Account # : _____ Routing # : _____

Bank Name: _____ Exp Dt. _____ Deduct on: _____ of each month

	September '19	October '19	November '19	December '19	January '20
Paid: cash/check					
Receipt #					
Date:					

	February '20	March '20	April '20	May '20	Jun '20
Paid: cash/check					
Receipt #					
Date:					

