



SAN RAMON VALLEY ISLAMIC CENTER, 2232 B CAMINO RAMON, SAN RAMON, CA 94583
(510) 866-7088

STUDENT REGISTRATION FORM
2011-2012

Student Information

Last Name	First Name, Middle Initial	M/F
Date of Birth	Age	School Attending

Parent Information

Father's Name	Mother's Name
Father's Occupation	Mother's Occupation

Home Address

Street, City, Zip	Phone
	Home:
	Cell:

Email Address/s

Emergency Contact Name and Phone: other than parent

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Sibling Information

Name	Age	SRVIC Teacher

Are you a member of SRVIC (circle one) Yes / No

If not please fill and submit SRVIC membership form

Parent's Declaration:

We would like to enroll our child (listed above) in the San Ramon valley Islamic Center (SRVIC) School program. Our child has our permission to participate in all activities of the school. We agree to hold harmless the San Ramon valley Islamic Center (SRVIC), its School Board and teachers & the San Ramon valley Islamic Center (SRVIC) Board of any and all liabilities, claims and injuries. We also agree to drop off our child promptly at 10 AM and pick up at 11:50 AM or drop off at 12 PM and pickup him/her immediately after Zuhr prayers (approx 1:40 PM). **I also declare that I have read and understood the registration and attendance policy as stated in the attached letter.**

Parent Signature:	Date:
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FOR OFFICE USE ONLY

Amount Paid : \$	Check / Cash	Books:
Assigned to teacher:		Test Completed: Yes / No
Date received:		Admin. Intials: