



NAIF EDUCATION

13515 Dulles Tech Drive Suite 1
 Herndon VA 20171
 Phone: 703-775-3009

Quran Class Registration Form

Section 1: STUDENT'S PERSONAL DETAILS

First Name		Last Name			
Date of Birth		Gender	Male		Female
Address					

- Names of any brother(s)/sister(s) already attending the school:

1- _____ 2- _____

Section 2: PRESENT KNOWLEDGE

- Name(s) of Islamic School(s) attended in the past and dates of attendance:

Name of School (Any City/Country)	From	To
_____ -	_____ -	_____
_____ -	_____ -	_____

Present Knowledge (Please Check One)				
	Beginner (No Knowledge)	Intermediate (Some Knowledge)	Basic (Good Knowledge)	Expert (Advanced Knowledge)
Quran Reading				
Islam/Fiqh				
Prophet Mohammad SAW				

Section 3: HEALTH CONCERNS

Please provide information if any health problem requiring special attention: _____

Section 4: PARENT / GUARDIAN INFORMATION

Father's Name			
Office Telephone		Cell Phone:	
Email:			
Mother's Name			
Office Telephone		Cell Phone:	
Email:			

Section 5: DECLARATION

I confirm that, to the best of my knowledge, the information provided in this form is correct. I have understood and agree to abide by all rules including discipline and tuition fee payment and refunds. I also acknowledge that while the NAIF does its best to ensure the safety of each participant's life, health and property, NAIF cannot be held responsible for any damage to these.

CONSENT FOR EMERGENCY MEDICAL TREATMENT

I HEREBY GIVE CONSENT TO NAIF AND ITS AFFILIATES TO PROVIDE ALL EMERGENCY MEDICAL OR DENTAL CARE TREATMENT NECESSARY TO PRESERVE THE LIFE, LIMB OR WELL BEING OF THE APPLICANT NAMED ABOVE INCLUDING BUT NOT LIMITED TO CALLING 911.

PHOTO RELEASE:

I, give permission to NAIF AND ITS AFFILIATES to publish photos/images/videos of me or my child on web site, and other social media and advertising material, including but not limited to: Facebook, Twitter, Instagram, Pinterest, YouTube, flyers, catalogs, brochures, and other advertising media. In granting this permission, I understand that NAIF may use them for purposes such as celebrating achievements and publicizing NAIF events. I am signing this release form with the knowledge that any photos/images/videos posted on the NAIF Web site and other social media and advertising material, as outlined above, can be downloaded and reprinted by various news organizations, including print, electronic and broadcast media, and I, therefore, release NAIF from any liability arising from use of my or my child's photos/images/videos in postings. Additionally, I understand that there are potential dangers associated with the posting of personally identifiable information on a Web site. I further understand that if I wish to rescind this agreement, I may do so at any time by sending a request to NAIF in writing. The requested rescission will take effect upon NAIF's receipt of the signed letter and will be applied for future incidents ONLY.

Signature of Parent/ Guardian

Date

Section 6: SCHEDULE AND FEE STRUCTURE

Admission Fee (non-refundable): \$25
 Books (Complete Set) and Material Fee (non-refundable) \$40
 Tuition Fee: \$ _____
 Varies based on classes and number of siblings
 Extra/Replacement Books and Study Material available for additional cost

Please select the days to enroll.

Weekend Only 10:00 am to 1:00pm		Week Days Evening Only				
Sat	Sun	Mon	Tue	Wed	Thu	Fri
		Starting Soon				

Monthly parent teacher conference is mandatory for all parents.

Parent/Guardian Signature _____ **Dated:** _____

FOR OFFICE USE ONLY

Application # _____ Student ID if enrolled: _____ Application Received: _____

Tuition Received Dated: _____ Received by : _____ Mode of Payment _____