

Student First Name		<div style="border: 1px dashed black; padding: 20px; text-align: center;"> <b>ATTACH A PICTURE OF THE STUDENT</b> ( Width: 2in, Height: 2in)         </div>	
Student Last Name			
Date of Birth (MM-DD-YYYY)			
Student Gender	Care Card Number		
Home Address		City	Province BC
Mother's Name		Mother's Phone No.	
Father's Name		Father's Phone No.	
Email Address for Reporting		Language(s) Spoken at Home	
Emergency Contact Name		Emergency Contact No.	
Family Doctor's Name		Doctor's Phone No.	
Illness Condition/Allergies/Treatment			
<p>I, the undersigned Parent, accept the following Terms and conditions:</p> <ol style="list-style-type: none"> <li>1. Parents agree to drop off and sign in the child inside the Masjid building and pick up from inside the building. This is for safety and liability reasons and is not negotiable.</li> <li>2. Parents acknowledge that the gymnasium area is NOT supervised, therefore the ISBC hold no liability in case of any injury or harm happen to their child(ren).</li> <li>3. In case of an emergency: the parents permit the ISBC to have an ambulance service take the child to health emergency facilities in case the parents and emergency contact can not be reached.</li> </ol>			
<u>Fees:</u>  <b>Tuition Fee: FREE.</b> <b>You may need to pay for study material only.</b>		Parent Name  Date Signed (MM-DD-YYYY)  Signature	

**\*\*\* Drop off completed and signed form at the school. \*\*\***  
**\*\*\* Pay fees at the school. Debit/credit cards are accepted. \*\*\***