

Evening and weekend school

For learning Qur'an, Den and Homework support.

Registration Form

Payment Option For the year of 201 - 201			1 St child					
		Name	First name		Last Name		Sex	
FOI LITE	e year or 201 201_	Date of birth		T		OHIP #		
Jan	\$	Dute of birth	Month	Day	Year			
Feb	\$	Allergies or other health problems (or any special instructions):						
Mar	ar \$							
Apr	\$							
May \$								
Jun	\$	Name	2 nd child First name		<u> </u>	Last Name Sex		
Jul	\$				-		T T	
Aug	\$	Date of birth				OHIP #		
Sep	\$		Month	Day	Year			
Oct	\$	Allergies or other health problems (or any special instructions):						
Nov	\$							
Dec	\$							
DCC	γ							
Father	/ Mother/ Guardian :	Name :						
		Address :						
		Phone # :						
Emero	ency Contract Name a							
Liller	elicy Collitact Ivallie a	ind priorie # .						
Discla	imer: The ECDC adm	inistration and /or instruct	tors are not resp	onsible f	or any inju	ry, loss, or dan	nages to self	
or pro	perty as a result of t	he program's activities. I h	ave fully unders	stood and	agree to t	he rules and re	egulations of	
-	and of this program.		,		J		J	
LCDC	and or and program.							
Paren	t's / Guardian Name	:						
		Signature:		Date:				

Etobicoke Community Development Centre, Unit # 11, 1701 Martin Grove Road, Etobicoke, ON M9 \lor 4N4Phone: 416-742-ECDC(3232), Fax-416-742-3235

Fees: Administration fee \$10, For 1st child \$40 and 2nd child \$30. Snacks included.