

ISNS AL-IHSAN ACADEMY IHSAN SUNDAY SCHOOL

3950 Industrial Avenue, Rolling Meadows, IL 60008, USA 847-253-6400, Directions
Website: <http://isnsalihsanacademy.org/> E-mail: principal@isnsalihsanacademy.org

Find us on:    

REGISTRATION FORM FOR 2018-2019 SCHOOL YEAR

Please clearly print and thoroughly complete all information

Currently Attending Ihsan Sunday school: YES NO

Father's Name: _____ Mother's Name: _____

Home Phone # :(____) / ____ / ____

Father's Cell # :(____) / ____ / ____ Mother's Cell # :(____) / ____ / ____

Father's Email Address: _____

Mother's Email Address: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Parents volunteer interested in: Library Lunch Recess Supervisor Events

STUDENT INFORMATION

First Name	Last Name	Date of Birth (MM / DD / YYYY)	Gender (M/F)	Grade	Photo** (Y/N)

ISNS Membership(family): \$ 120.00

Tuition	ISNS Member	Non-Member
One student	\$180.00	\$300.00
Two students in the family	\$340.00	\$460.00
Three students in the family	\$480.00	\$600.00
Four students and more	\$600.00	\$720.00

Full Tuition fees will be due on the first day of school.

Additional \$50 per child after 9/9/2018

Tuition fees: NOT REFUNDS AFTER 9/30/2018

Seats are not guaranteed if any class is full.

**** Parental permission is required for posting photographs of students on Al-Ihsan Academy Website/FB/Newsletter.**

Yes: I give permission

No: I do not give permission

- I will ensure my child(ren) follow the school rules
- I will ensure my child (ren) dressed in accordance with the Islamic Dress code.

Parent's Signature: _____

Date: ____/____/____

✓ Make Checks Payable to "ISNS" and include "Sunday school, Home/Cell Phone #" in the memo.

FOR OFFICE USE ONLY

ISNS Member

Number of Students	Fee
One	\$180.00
Two	\$340.00
Three	\$480.00
Four	\$600.00

ISNS Non-Member

Number of Students	Fee
One	\$300.00
Two	\$460.00
Three	\$600.00
Four	\$720.00

Total: \$ _____

Fees Waived

Sponsor a family who is unable to attend Sunday School:
\$ _____ (Suggested \$400)

Amount Paid: \$ _____

Payment Type : Check Cash CC

Check #: _____

Credit Card

Visa Master

CC#: _____

Expr. Date (MM/YYYY) : ____/____

EMERGENCY CONTACTS

Name	Phone 1	Phone 2	Relationship

CHILDREN MEDICAL INFORMATION:

Student Name	Grade	Medical, Allergies and other details

PARENTS/GUARDIAN RESPONSIBILITIES

Parents are expected to accept the following responsibilities for their children in accordance with Islamic guidelines:

- Pay all tuition fees required by the school for the students' enrollment in the school.
- Bring your children to school every day on time, clean, well groomed and dressed in accordance with the Islamic Dress code.
- Make sure your children bring their books and all necessary study materials.
- Pick up your child on time
- Teach your child to respect everyone
- Encourage your child to be kind and courteous
- Encourage your child to respect all the teachers and to obey the school rules
- Actively support the programs and activities of the ISNS Al-Ihsan Academy.
- Attend Parent-Teacher Conferences when scheduled
- Dhuhr prayer is part of Al-Ihsan Academy curriculum and it is expected for all students and parents to participate in it in the Masjid prayer hall.
- ISNS Al-Ihsan Academy Field trip/s will require Parent's permission. Field trip information and permission slip will be sent to parents.
- Check weekly with your children for homework assignments, quiz/exam dates, and for any written notices sent from ISNS Al-Ihsan Academy
- When needed, Schedule appointments with the teachers, an appropriate time for a short meeting is after school.

Additionally:

- Parents are not allowed in the **classroom or hallway**.
- Any Parent who disrupts the operation of school and creates conflicts will have their registration cancelled.
- Sometimes children misunderstand or misinterpret the information given in the class. If you hear something from your child that sounds strange or wrong. **Please verify the information with the teacher directly** instead of spreading the misinformation.

I affirm that the above information is **complete** and **true** to the best of my knowledge.

I verify and agree that my child must abide by the rules of the school and must participate fully in the program. I *understand* that **Al Ihsan Academy Sunday School** reserves the right to request any participant to leave the program if a participant's conduct is determined to be disruptive to the program and fellow registrants.

I *understand* that the organizing institutions, administration, their officials, and staff are not responsible for any injuries or loss of property that may occur.

In the case of an emergency where I cannot be contacted, I *authorize* the administration to seek medical attention and/or administer any needed emergency procedures for the registrant. I also *authorize* my insurance information to be used and I authorize ISNS or the insurance company to release any information required to process the claim. In such a case, I *understand* that I am financially responsible for any due balance.

I understand that my child (ren) will not be allowed to begin or continue with the program if payment in full is not submitted prior to the beginning of their first session

Print Parent Names: _____

Signature of Parent/Guardian: _____ Date: ___/___/___