



## STUDENT INFORMATION

Student last name:			
First name:		Birth date: / /	
Street address:		Home phone no: ( )	
Suburb:	State:	Mobile phone no:	
Post Code:	Email:		
Occupation:		Ethnic Background:	
I know about Daar Aisha through (please check one box below):			
<input type="checkbox"/> Family/Friend	<input type="checkbox"/> Poster/Flyer	<input type="checkbox"/> Internet	<input type="checkbox"/> email <input type="checkbox"/> Other

## COURSE INFORMATION

THURSDAY	Learn to read Qur'an	6:30pm - 8:30pm	<input type="checkbox"/>

## IN CASE OF EMERGENCY

Name of local friend or relative:	Relationship to student:	Home phone no.:	Work phone no.:

The above information is true to the best of my knowledge. I have read the attached 'School Policy' and I agree to abide by the rules and conditions of Daar Aisha (ra) Shariah College, as outlined in that document.

\_\_\_\_\_  
*Student signature*

\_\_\_\_\_  
*Date*

*Please note a \$30 registration fee applies to all new students in order to process this application.  
This fee does not apply to students currently enrolled in any course/s at Daar Aisha.*

## OFFICE USE ONLY

Date received :	Payment received:	Notified: