HIFZ FULL TIME (BOYS) APPLICATION FOR ADMISSION



COMPLETE application form and FULL payment is required to process the registration.

INCOMPLETE applications WILL NOT be processed.

STUDENT ID:	APPLICAT	TION DATE:	
SECTION I. STUDENT INFORMATION			
LAST NAME:	FIRST NAME:		MI
ADDRESS 1 (House Number, Street Name):			
CITY:		STATE: ZIP / POSTAL CO	DE.
			, DE.
HOME PHONE NUMBER:		ALTERNATE PHONE NUMBER:	
IOME FITONE NOWIBER.		ALIERIVATE PHONE NOWIBER.	
CHOOL GRADE AGE D O B:		GENDER:	
CHOOL GRADE AGE DO B.		MALE	
		IVIALE	
SECTION II. PARENTS INFORMATION			
ATHERS LAST NAME:	FIRST NAME:		MI
ATHERS E-MAIL ADDRESS:			
VORK NUMBER:		CELL NUMBER:	
MOTHERS LAST NAME:	FIRST NAME:		МІ
NOTHERS E-MAIL ADDRESS:			
VORK NUMBER:		CELL NUMBER:	
	<u></u>		
SECTION III. EMERGENCY INFORMATION			
EMERGENCY CONTACT LAST NAME:	EMERGENCY CONT	ACT FIRST NAME:	MI
PHONE NUMBER:	コ	ALTERNATE PHONE NUMBER:	
SECTION IV. ALLERGY/MEDICAL CONDITION/SI	PECIAL NEEDS INFORMAT		
Service Management of Development			
SECTION V. FEES AND METHOD OF PAYMENT (A			
ees, \$300 per month per student to Manassas I	•		
Ne will only accept credit card or direct deposit j	for the fees. No cash pay	ment will be accepted.	
Check: Cash	Credit Card: Visa	☐ MasterCard ☐ Discover	AMEX
Credit Card #:		CV Code Expiration Date:	

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ALL PARENTS MUST READ AND ACKNOWLEDGE THE MMA HIFZ PROGRAM RULES

Section VI. MMA HIFZ PROGRAM FULL TIME BOYS PROGRAM RULES

The Rules in this section are critical for the development and implementation of a quality education system with shared responsibilities between Parents, Teachers and MMA Administration.

Hifz Program School Rules are as below MUST be followed at all times:

- Hifz Program is for kids (Boys Only) 5 years and above.
- Schedule: Daily from 8:30 am to 5:00 pm
- Students (Boys Only) MUST be in class at 8:30 am; NO DELAYS PLEASE
- All FEES MUST be paid in advance at the start of the month.
- Please disclose any special need(s) and/or medical condition(s) of the student to avoid any issues and prompt action if needed.
- Parents MUST follow the parking rules when dropping off and Picking up students.
- All parents MUST be punctual in dropping off and picking up students ON TIME without delay.
- Parents will be charged a late pickup fee of \$10 for first 5 minutes and \$1 a minute thereof (unless notified in advance).
- All parents MUST ensure that the students are following the cleanliness and dress code for reciting the Holy Quran as below:
 - 0 All Boys Must have a kufi and dress, such as thobe, shalwar kameez or shirt/pants
 - NO SHORTS or SHORT PANTS
 - Have performed wudu
 - Are not wearing clothing with pictures of living creatures (not allowed)
- Parents are not allowed to sit in during the class.
- Inclement Weather: Please follow the Prince William County School Advisory for school closure. If PWCS weekend actives are cancelled, MMA Sunday School will also be closed.

PLEASE SIGN AND ACKNOWLEDGE

1.	I, _							, r	ecognize	that th	е ри	irpose of	the
	info	ormation su	bmitt	ted in th	is appl	ication is to	evaluat	e my st	udent(s) eligibili	ty fo	or enrolln	nent
	into	o MMA Hifz	Full 7	Time Pro	gram.								
2.	I, _							, ha	ve read	and und	erst	ood the r	rules
	in	"SECTION	VI.	MMA	HIFZ	PROGRAM	FULL	TIME	BOYS	PROGRA	4M	RULES"	'. <i>I,</i>
						, acki	nowled	ge and o	agree to	abide by	the	se rules a	at al
	tim	es to ensure	the.	safety ai	nd secu	rity of the stu	ıdent(s)	and pr	otect th	e interes	t of I	MMA.	
3.	Ι,							, a	uthorize	MMA	to	deduct	the
	pav	ments from	mv (Credit ca	ırd or B	ank Account	as per t	he aare	ed upon	schedul	e.		

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SIGNATURE OF PARENT GAURDIAN	NAME OF PERSON SIGNING	RELATIONSHIP TO STUDENT(S)	DATE:
CTUDENT ID.	FOR OFFICE USE		
STUDENT ID: LEVEL: BASIC	INTERMEDIATE	STARTING DATE: ADVAN	
PAYMENT SCHEDULE:		9	ANNUAL
VOID Check or Credit Card is Inc	luded for Monthly Payment Mode	YES	○ NO
Application Ac	cepted by	Application R	eceived on