

Attach your
child's
photo
here

portsmouth Central Masjid



المسجد المركزي بورتسموث

Maktab Class – Pupil Enrolment and Identification Form

Pupil's Details;

Full Name: Class:

Other Names:

Date of Birth:

Address:

..... Post Code:

Parent/Guardian's Details;

Full Name:

Address if different from above:

..... Post Code:

Telephone Home:..... Mobile:

Parent's/Guardian's Signature Date

Emergency Contact Details; Please give details of any close relatives who can be contacted in an emergency, in case we are unable to contact you.

Full Name:

Relationship with your child:

Address:

..... Post Code:

Telephone Home:..... Mobile:

Additional Information; Please list any illness, disability or allergies and advice if any special precautions or arrangements will need to be made for your child.

.....

Admission Tutor; Name:

Admission Tutor's Signature Date