



## DAGENHAM CENTRAL MASJID EVENING MADRASAH

798 Green Lane, Dagenham, Essex RM8 1YT

Tel: 020 8590 4188

www.bhis.info

Reg Charity No. 1131215

### Admission Form

#### Student Details

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

D.O.B: \_\_\_\_\_ Age: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Gender: Boy  Girl

School Name: \_\_\_\_\_

#### Parent / Guardian Details

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Home Tel: \_\_\_\_\_ Mobile No: \_\_\_\_\_

#### Emergency Contact Details (Other than Parent)

Contact Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Emergency Contact No: \_\_\_\_\_

Does the child have a medical problem? Yes  No

If YES, please provide details: \_\_\_\_\_

Doctor / GP Name: \_\_\_\_\_ Contact No. \_\_\_\_\_

#### Declaration

I hereby certify that according to the best of my knowledge, all the information I have provided is correct and I agree to abide by all the attached rules and regulations of this Evening Madrasah.

Signature of Parent / Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

#### Official Use Only

Name of Examiner: \_\_\_\_\_ Date of Admission: \_\_\_\_\_

Report: \_\_\_\_\_

Class Admitted to: \_\_\_\_\_ Admission Fee: \_\_\_\_\_ Signature: \_\_\_\_\_