



In the Name of Allah, the Most Beneficent, the Most Merciful  
**LONG ISLAND MUSLIM SOCIETY, INC.**  
 475 East Meadow Avenue, East Meadow, NY 11554 Tel: (516) 357-9060

**Bangla School Registration Form**  
**2016-2017 School Year**

**Parent/Guardian Information:**

Father (Last Name) \_\_\_\_\_

(First Name) \_\_\_\_\_

Mother (Last Name) \_\_\_\_\_

(First Name) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Home Phone No.: ( ) \_\_\_\_\_

Cell Phone No.: ( ) \_\_\_\_\_

Emergency Phone No.: ( ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Student Information:**

Last Name	First Name	Name in Bangla	Age	M/F

**Parent Declaration/Waiver**

“We hereby enroll the above listed child (ren) in LIMS and grant our permission for their participation in all activities of the school including field trips. We agree to hold harmless the Executive Committee, the Islamic Center, and their agents from any and all liabilities, claims, injuries, or losses. We are aware of the school policies and agree to abide by them.”

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Registration Fee: \$100.00 per student (For full academic year)**

**Office Use Only**

Amount Paid \_\_\_\_\_

Check/Cash \_\_\_\_\_

Check No. \_\_\_\_\_

Date \_\_\_\_\_

Authorized Signature: \_\_\_\_\_