



Summer 2008 Registration

APPLICANT INFORMATION			
Last Name	First	M.I.	
Street Address			Apartment/ Unit #
City	State	ZIP	
Phone	E-mail Address		
Courses to take: (Please check courses you wish to enroll in)			
Arabic	Beginner ____	Intermediate ____	Advanced ____
Quran Recitaion/Tajweed	Beginner ____	Intermediate ____	Advanced ____
Quran Tafsir	____		

EDUCATION					
High School:					
From	To	Did you graduate	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
College:					
From	To	Did you graduate	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other:					
From	To	Did you graduate	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

PAYMENT REGISTRATION: \$15 COURSE: \$100/MONTH						
<i>Please Circle One:</i>						
Visa	Mastercard	Discover	Cash	Check	Money Order	Total Amount: \$
Credit Card Number:				Exp. Date:		
Check/Money Order #:						
Signature:						