

The Islamic American Society of Connecticut

Early Learning Center

120 Schraffts Dr. Waterbury CT. 06705 - Tel. (203)756-6000

September 2018

Dear Parent/Guardian:

It is our pleasure to welcome you to the Masjid Al-Mustafa Early Learning Center! This program provides 3, 4, & 5 year old children with early exposure to Islamic education in a fun and interactive environment focused on learning through play.

Our Mission:

- To provide children with a balanced Muslim American foundation to grow spiritually, intellectually, and socially.

Curriculum:

→ Educational:

- Quran
- Arabic
- Islamic Studies

→ Social/Emotional:

- An Islamic environment
- Islamic morals and values
- Center activities and play

Class Times:

- Monday through Thursday
- 10:00am - 1:00pm
- Students must bring a lunch/snack from home. *Please be advised this is a nut free zone.

Registration:

- One enrollment form must be completed for each child enrolled in the Early Learning Center in September 2018. please fill out registration form and return it to the Quran Institute.
- Children enrolling in the Early Learning Center MUST be between 3-5 years of age and potty-trained.
- Things to bring with you upon registration:
 - Completed Enrollment Form
 - Initial Enrollment Fee + First Month's Tuition

Photo, Audio, and/or Video Permission:

- Images, recordings or student work may be used or replicated in various ways throughout the school year to demonstrate your child's' hard work.

Fees:

- Overview:
 - 1st Child: \$50 Enrollment Fee + \$100.00/month
 - 2nd Child: \$50 Enrollment Fee + \$60.00/month
 - 3rd Child: \$50 Enrollment Fee + \$40.00/month
- Fees must be paid upon registration and at the start of each month.
- If fees are not paid on time, parents will be contacted as a reminder.
- If fees still remain unpaid, the student will not be able to attend class until the payment is complete.
- One Time Annual fee of \$50 per student

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Enrollment Form

Student Information:

First Name: _____ Last Name : _____

Middle Initial: _____ Gender: Male / Female Date of Birth: ___/___/_____

Address: _____

City: _____ State: _____ Zip Code: _____

Existing Medical Conditions: _____ Allergies: _____

Additional Comments & Information: _____

Primary Contact Information:

Parent/Guardian #1: _____ Relationship: _____

Email address: _____ Telephone (Home) #: _____

Preferred Contact Method : _____ Telephone (Mobile) #: _____

Parent/Guardian #2: _____ Relationship: _____

Email address: _____ Telephone (Home) #: _____

Preferred Contact Method : _____ Telephone (Mobile) #: _____

Waiver and Release of Liability:

I agree to release, indemnify, defend and hold the Islamic American Society of Connecticut, their officers, employees, and agents harmless from any liability, and all present or future claims presented by my child for any injuries, losses or damages. I agree that this Waiver and Release of Liability shall be applicable to all prior, present, and future claims, suits, or related causes of action regardless of signature date.

Agreement:

Your signature on this form indicates that you acknowledge that you have reviewed and agree to the policies indicated on the previous page. **Please sign and return this page to Sr. Aisha.** Keep a copy of this form for your reference - Jazak Allah Khair!

Your Name: _____ Relationship to Child: _____

Signature: _____ Date: ___/___/_____