

**HOUSE OF PEACE**  
Westville Islamic Community Center (WICC), Inc  
1420 Pilgrim Ave, West Deptford, NJ 08096

For use by WICC  
Registration Fee

BANGLA LEARNING CLASS

Registration Form for period ending June 2019

*Please type or print the following information:*

Name of Student \_\_\_\_\_  
(Last) (First) (Middle)

Date of Birth \_\_\_\_\_ Present Age \_\_\_\_\_ Sex \_\_\_\_\_

Name of Student in Bengali \_\_\_\_\_

Mother's Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone# \_\_\_\_\_ Cell # \_\_\_\_\_

E-mail \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_

Emergency Phone# \_\_\_\_\_ Emergency Cell # \_\_\_\_\_

By registering my child in the LANGUAGE LEARNING CLASS I, acknowledge the following:

*The above information is complete and correct. I understand that WICC is not responsible for any injury or loss that may occur while my son/daughter is at school. In case of an emergency in which I cannot be contacted, I authorize WICC to seek medical attention and/or administer any needed emergency procedures for my son/daughter.*

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_