

## Parental Contract Form

Thank you for choosing **Al-Mahdi Learning Institute**. We believe that a strong partnership between the school and home is critical for your child to excel spiritually, academically, and in terms of personality development. This document highlights the three key areas where we hope to work closely with you. Please refer to the policies available on our website ([www.almahdilearninginstitute.ca](http://www.almahdilearninginstitute.ca)) for additional details.

### Spiritual Excellence

The environment at Al-Mahdi Learning Institute is designed to help your child excel spiritually. It is imperative that the messages they receive at home and the school is complimentary and allows them to become deeply rooted in our faith. Please ensure that they do not have free access to TV programs, internet sites, violent video games and books that promote themes which indirectly contradict Islamic values. Once they have built a strong positive foundation and are older, they will be able to deal with such influences appropriately inshallah.

### Academic Excellence

Al-Mahdi Learning Institute has a more rigorous academic standard than most of the schools in the region. Our goal is to ensure that our students excel academically and get accepted into top universities after graduating from this school. The classwork, tests, and homework assignments at our school are comparable to the top ten private schools in the region and require the students to work hard both at school and at home. We expect parents to be active partners in their child's academic success and work with them daily to ensure the highest level of quality in their academic performance.

### Personality Development

Discipline, confidence, punctuality, respect, and leadership are some of the key values that are instilled in every student at our school. At Al-Mahdi Learning Institute, it is 'cool' to be respectful, kind and helpful. We have a zero-tolerance policy for bullying, negative comments or negative behavior and require your help to reinforce this message at home as well. Please bring your child to the school and to all school events on time so that they can learn to be punctual and respectful of other people's time. Please also ensure that they learn that their entertainment or actions should not cause discomfort or disturbance to anyone else.

At Al-Mahdi Learning Institute, we engage in several activities throughout the year for personality development of your child and encourage you to engage in similar activities e.g. martial art programs that teach them discipline and respect and build their confidence and character. We look forward to working with you closely to develop children that will excel spiritually, academically and personality wise.

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I have read and understood the above document. I agree to partner with Al-Mahdi Learning Institute for my child's success and will ensure that my child follows the school rules/policies:

Date: \_\_\_\_\_ Name of the child: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of the mother: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of the father: \_\_\_\_\_ Signature: \_\_\_\_\_

## Admission Information

The admission is not confirmed until we have received the following:

- Registration Fee — Please note that registration fee is non-refundable
- Void cheque
- Signed parental contract
- Copy of identity — Passport or Birth Certificate
- Immunization Records — Up to Date

**We have limited spots available which will be allocated on a first-come-first-serve basis to the families that provide the above information in a timely manner.**

Please note the following:

- a. The fee charged from your account for 10 months from August 20, 2020 to May 20, 2021
- b. School Fee: \$350 monthly, for 10 months
- c. Book Rental Fee: \$250 annually
- d. Registration fee: \$350 for new students

**Please note that we will provide 15% discount for the second child, and 30% for the third child.**

Total amount debited from the account on the 20th of every month: \_\_\_\_\_

(Parent's initial: \_\_\_\_\_)

If the fee charge is refused by the bank for any reason, the following administrative fee will be added to the due payment:

- a. First occurrence: \$25
- b. Second occurrence: \$50
- c. Third occurrence: \$75
- d. Fourth or higher: \$100

Please note that it is critical that you monitor students' exposure to media, internet and social media to ensure that they do not view inappropriate contents at home and discuss those materials with their classmates. Failure to comply with this policy will result in disciplinary action including suspension and/or expulsion of the student from the school.

Please note that you are required to attend the "Parent/Teacher Meeting" to strengthen the connection and ensure coordination between school and home.

Name of the parent: \_\_\_\_\_ Signature: \_\_\_\_\_

Admission processed by: \_\_\_\_\_ Title: \_\_\_\_\_

## REGISTRATION FORM

### Student Information

Please type or print legibly.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Gender:  Female  Male D.O.B (yyyy/mm/dd) \_\_\_\_\_  
Grade in September 2020: \_\_\_\_\_ Age: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_  
Province/State: \_\_\_\_\_ Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Country of Birth: \_\_\_\_\_ Country of Last Residence: \_\_\_\_\_  
Province of Birth: \_\_\_\_\_ Arrival Date: \_\_\_\_\_  
Country of Citizenship: \_\_\_\_\_ Reentry into Ontario Date: \_\_\_\_\_  
Status in Canada: \_\_\_\_\_ Language(s) Spoken at Home: \_\_\_\_\_

Previous School: \_\_\_\_\_ Previous Board Attended: \_\_\_\_\_  
Previous School's Address: \_\_\_\_\_  
Last Attendance: \_\_\_\_\_ Last Grade Attended: \_\_\_\_\_  
First Entry into Elementary School (yyyy/mm/dd): \_\_\_\_\_  
Has your child previously received ESL Assistance? Yes  No   
Student has an IEP Yes  No   
Has your child previously received Special Education Assistance? Yes  No  Unsure   
Has your child ever been expelled from another school? Yes  No   
If yes, was the student re-admitted? \_\_\_\_\_

Health Card Number \_\_\_\_\_ OEN (if available): \_\_\_\_\_  
Specify any of your child's health problems: \_\_\_\_\_  
Is your child on any medication? No Yes If yes, please specify: \_\_\_\_\_  
Siblings at this School: Yes  No   
If Yes, number of siblings: \_\_\_\_\_ Name of siblings: \_\_\_\_\_

### Parents / Guardian Information

Please type or print legibly.

Mother's name: \_\_\_\_\_ Father's name: \_\_\_\_\_  
Mother's phone: \_\_\_\_\_ Father's phone: \_\_\_\_\_  
Mother's cell: \_\_\_\_\_ Father's cell: \_\_\_\_\_  
E-mail: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Address (if different from student): \_\_\_\_\_  
\_\_\_\_\_

Person's authorized to pick up the student: \_\_\_\_\_

**Emergency Contacts**

Please type or print legibly.

Emergency contact 1: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency contact 2: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**Payment Information**

Please type or print legibly.

Grades JK-8  Monthly fee: _____ Registration: _____ Books fee: _____  <b><u>The monthly fee will be divided over 10 payments from August 20, 2020 to May 20, 2021</u></b>	Please include the following with the registration form:  1. Registration/transfer fee 2. Void cheque 3. Copy of immunization record 4. Copy of health card 5. Copy of last report card 6. Copy of birth certificate	<b>School Use Only</b>  Payments Information Fee: _____ Discount: _____ Donation: _____  Administrator's name & signature: _____ _____
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**Acknowledgment**

Please type or print legibly.

I, \_\_\_\_\_ the parent/guardian of the child registered above, agree to follow Al-Mahdi Learning Institute's rules and policies. I also understand that the school requires partnership and support from me to have my children excel spiritually and academically. Signing this form gives consent to the Al-Mahdi School administration and teachers to utilize information collected here for school related matters only. It also gives authorization to the school for posting pictures of my children taken during school events and activities in school magazines and website. I verify that the information on this form is true and correct. I understand it is my responsibility to keep the school advised of any change in the above information as soon as possible.

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

Office Use Only			
Student Number:		OEN#:	
Track:	Grade:	Homeroom:	Register:
Program:	Admit Date:	Status:	
OSR Status:	Requested Date:	Received Date:	
OEN Status:	Requested Date:	Received Date:	
School Record			
Most Recent Report Card: <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> ; if not, why?			
Birth Verification			
Birth Certificate/Statement of Live Birth/Birth Registration <input type="checkbox"/>		Passport <input type="checkbox"/>	
Citizenship Card <input type="checkbox"/>		Record of Landing (IMM 1000) <input type="checkbox"/>	
ESL/ELD and Special Education			
ESL/ELD <input type="checkbox"/>		Special Education: <input type="checkbox"/>	
Code:			
Level:			
Sign Off - This form is to be completed and attached to the Registration Form			
Registration entered by: _____			
Date: _____			
BSID#: _____ Entry Date: _____ Entry Code: _____			