



Milton Keynes Islamic and Cultural Association

Madrassa Enquiry Form - Parent Contact Information

First Name:		Family Name:	
Address:			
Town/ City:	County:	Post Code:	
Email:			

Student Information – Please continue on a separate sheet if necessary

Child Full Name:	Gender	D.O.B:
	M <input type="checkbox"/> F <input type="checkbox"/>	
	M <input type="checkbox"/> F <input type="checkbox"/>	
	M <input type="checkbox"/> F <input type="checkbox"/>	
	M <input type="checkbox"/> F <input type="checkbox"/>	

Madrassa

Please place a tick against the name of the madrassa(s) which your family would like to enquire about

Madrassa	Days	Time	Tick
Al-Noor	Mon & Thurs	17:00-20:00	
Immam Shaafici	Tues, Fri & Sat	17:00-20:00 13:00-18:00	
Umu Salama	Fri & Wed	17:00-20:00	
Ibnu Masooud	Sat & Sun	09:00-13:00	