

Please bring \$2 each session

Registration Form

Student's Full Name:		
Age:	Gender: [] Male [] Female	
Email:	Phone:	
Home Address:		
Food Allergies:		
Alternate/Emergency Contact:		
,	Phone:	
Name:A Limit of Liability Disclaimer: A the risk of injury for my childr the Muslim Society of Waterla contractors, harmless from all Dress Code and Curtain Sepa on their respected sides , sepa	a condition of participation in any Waterloo Masjid activity/school, I agree to assu , arising from use of the faculties, programs, and equipment. I hereby release and & Wellington Counties and its officers, Board, employees, agents, volunteers, and laims of injury or damage, however it may be caused. <u>tion Divider:</u> No clothing with imagery is allowed. Boys and Girls are to remain st	l hold I
Name:A Limit of Liability Disclaimer: A the risk of injury for my childr the Muslim Society of Waterla contractors, harmless from all Dress Code and Curtain Sepan on their respected sides , sepan Activity Time: Please do not	a condition of participation in any Waterloo Masjid activity/school, I agree to assu , arising from use of the faculties, programs, and equipment. I hereby release and & Wellington Counties and its officers, Board, employees, agents, volunteers, and laims of injury or damage, however it may be caused. tion Divider: No clothing with imagery is allowed. Boys and Girls are to remain st ated by divider.	l hold I