



Pakistan's First Arabic & English Medium Islamic School

REGISTRATION FORM

Serial No: _____

Student Information

Date: _____

Name: _____ Date of Birth: _____

Father's Name: _____

Mother's Name: _____

Address: _____

Contact: Father's No: _____ Mother's No: _____

Res No: _____ Email: _____

Admission Information

Last Institute: _____

Information source: _____

Last class: _____ Admission Required: _____

Parents Signature

For Office Use

Test Date: _____ Test Time: _____ Amount: _____

Remarks: _____

Accountant Signature

Parents Signature

Registration Slip

Serial No: _____

Admission Required: _____

Test Date: _____ Test Time: _____ Amount: _____

Head Office : B-76, Block-J North Nazimabad, Karachi.

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