



**Re-Enrollment & Verification of Information**  
**2020-2021**

In order to estimate enrollment for the next school year (2020-2021), we request that you indicate to us whether you wish to re-enroll your child (ren) at Madina Academy ("Academy").

I/ we **do not** wish to re-enroll my child/ren  at Madina Academy for the academic year **2020-2021**. I understand that the Academy may assign the seat to other students.

.....OR.....

I/ we **wish** to re-enroll my child/ren  at Madina Academy  
Student's Name  
for the Academic year **2020-2021**.

**Please note that upon receipt of this re-enrollment form, The fees for 2020-2021 school year are as follows: A \$350.00 book usage fee per student, \$150 activity fee per student, a \$85 technology fee and \$50 smart tuition fee per family (if you) is due by June 17<sup>th</sup>, 2020 along with the confirmation of re-enrollment for the 2020-2021 school year. The fees are NON-refundable, all fees must be paid by Jun 17<sup>th</sup>, 2020 online payment to Smart Tuition, \$100 late fee will be charged after deadline.**

I/ we understand that admission to Grade KG / 1 / 2 / 3 / 4 / 5/ 6/ 7/ 8/ 9/10/11/12 (circle one) will be contingent on the successful completion of the current year's academic requirements; the recommendation of the current year class teacher as indicated on the child's final progress report; and full payment of any outstanding balance. I/ we understand that this form is *not* a confirmation of re-admission.

I also verify that all the information given in my child's initial registration documents is still valid. In case of any changes, I am submitting new and updated information in the second page.

I agree to abide by all the policies established in the Handbook (which can be accessed from [www.MadinaAcademy.org](http://www.MadinaAcademy.org)) or which are otherwise established from time to time by the Board.

I hereby affirm that, to the best of my knowledge, all statements made herein are true and complete.

Father's/Guardian's Last Name First Name Signature Date

Mother's/Guardian's Last Name First Name Signature Date

**It is very important that the information on your child's enrollment form be kept up to date. Please indicate any additional information or changes that need to be made to your current enrollment form.**

(If there are a number of changes, please contact the Madina Academy office for a new enrollment form.)

**Please list the changes as needed:**

Address Change:

Phone Number(s):

E-mail Address:

Medical Information:

Guardian:  Yes  No

Parents' Martial Status:

Any other changes:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father's/Guardian's Last Name	First Name	Signature	Date

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother's/Guardian's Last Name	First Name	Signature	Date

Administrator's Signature:

**For Office Use Only:**

Application Reviewed By: <input type="text"/>
Date Received: <input type="text"/>
Remarks: <input type="text"/>