

# ICM Quran Memorization

## About the program:

- The objective of this program is to help our kids memorize parts of the Quran while enhancing their relationship and love to the Quran and each another in an Islamic environment.
- The assistant Imam Abdulahad Telwar will be in charge of this program.
- The classes will go in segments each will last up to 4-8 weeks.

## Age Requirements:

Must be over 6 years old.

## Fees:

\$5 per person, money will be used for awards, gifts and encouragements.

## Schedule:

- Classes will start on Tuesday November 24th.
- First segment is for 8 weeks and will include the first 1/2 of Juz 30 of the Quran.
- Classes will be held twice a week on Tuesdays and Thursday from Magrib to Isha.

## Rules and limits:

- We have enough space for 15 kids so register quickly before we are full.
- This program requires parents help, and you must be able and willing to spend at least two hours a week with your child.
- Children who are not able to keep up and can not follow the class rules may be expelled.

## How to apply:

- At the masjid
- Online by filling the online form.

*In The Name of Allah (swt) the most beneficial, the most merciful.*

## ICM Quran Memorization Courses Application form

### Attendant Name(s)

1<sup>st</sup> Attendant's Name: \_\_\_\_\_ Birth Date/Age: \_\_\_\_\_

2<sup>nd</sup> Attendant's Name: \_\_\_\_\_ Birth Date/Age: \_\_\_\_\_

3<sup>rd</sup> Attendant's Name: \_\_\_\_\_ Birth Date/Age: \_\_\_\_\_

### Parents Contacts

Parent (Guardian) Name (if attendant under 18): \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Emergency Contacts:

Emergency Contact Name \_\_\_\_\_ Phone: \_\_\_\_\_

### Initials and signature

- **Medical Emergency policy:** It is our policy to notify a parent when a child is ill or in need of medical attention. Occasionally we are unable to contact parents, and we need to get immediate help for the child. Our procedure is to have the child taken to the nearest hospital by ambulance. (Ambulance fee is the parent's responsibility) If an ambulance is not available, our staff will transport the child I hereby give permission to the child care provider/staff to make necessary transportation.
- By signing this form I understand that the ICM (which refers to the Islamic Center of Murfreesboro) is a non-profit organization managed mainly by volunteers. We also understand that all of the ICM activities and services are not for profit services, managed jointly by paid and volunteer individuals. We further understand that one of the main conditions of admissions, volunteering and/or participation in any activity or service offered by the ICM or its committees or affiliates, is that the total liability of the ICM and all its committees, affiliates, paid staff and volunteers, regardless of the circumstances and the issue, is limited to an amount not to exceed \$500. We accept this condition, without any reservation.
- **Yes I want to enroll myself/child in the ICM Quran memorization program and I have read and understood the terms above.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail completed form back to us, drop in donation box or hand to one of the coordinators.