

## Guardian Form | Form B

If you have more than one child applying, one of these forms will be sufficient, as long as all the details mentioned below are the same; i.e., they live at the same address, etc.

### Father

First Name	<input type="text"/>	Middle Name/s	<input type="text"/>
Surname	<input type="text"/>	Occupation	<input type="text"/>
Mobile	<input type="text"/>	Email	<input type="text"/>
First Language	<input type="text"/>	Second Language	<input type="text"/>
Address (if different)	<input type="text"/>		

### Mother

First Name	<input type="text"/>	Middle Name/s	<input type="text"/>
Surname	<input type="text"/>	Occupation	<input type="text"/>
Mobile	<input type="text"/>	Email	<input type="text"/>
First Language	<input type="text"/>	Second Language	<input type="text"/>
Address (if different)	<input type="text"/>		

### Other Guardian (Please complete this if the child is living with someone other than the mother or father.)

First Name	<input type="text"/>	Relation (to child)	<input type="text"/>
Surname	<input type="text"/>	Occupation	<input type="text"/>
Mobile	<input type="text"/>	Email	<input type="text"/>
First Language	<input type="text"/>	Second Language	<input type="text"/>
Address (if different)	<input type="text"/>		

**Continued Overleaf**

## Home Address and Phone

First Line	<input type="text"/>	Second Line	<input type="text"/>
Third Line	<input type="text"/>	Town	<input type="text"/>
Postcode	<input type="text"/>	Landline Phone No	<input type="text"/>

**Communications** – (Opt in or Opt out') The madrasah sends important WhatsApp messages and emails to parents, without these parents will not be updated regularly. We would encourage all parents to 'Opt in' to keep updated to all the important information.

Yes – Opt in

  

No – Opt out

If you would like one of the parents to 'Opt-Out' or have any exceptions please indicate clearly in writing below:

**Emergency Contact** - This is someone who does not live with the child e.g. uncle, grandmother, or neighbour. We will contact them if we cannot get through to the family in an emergency:

First Name	<input type="text"/>	Middle Name/s	<input type="text"/>
Relation (to child)	<input type="text"/>	Phone number	<input type="text"/>

**Collecting your child from Madrasah (Important)** – Who is likely to collect the child from school and what's their relation to the child. Please give up to 3 names below:

  
  

**Note:** If we do not recognise the relative collecting your child, we will call parents prior to allowing them to collect the child

**Travelling Alone** – Only fill in this section if your child will be travelling to and from madrasah alone. How is your child likely to travel (cycle, walk, public transport)?