

Registration Form

ICSNC Persian School

Student Name (First and Last)	Date of Birth (Youth Only)	English school Grade (Youth Only)	Any Allergies (List)
1 _____	_____	_____	_____
2 _____	_____	_____	_____
3 _____	_____	_____	_____
Home Address _____			
Home Phone# _____		Mobile # _____	
Primary Email _____		Secondary Email _____	
Emergency Contact _____		Emergency Phone _____	
Parents Name (Youth Only) _____			

New Students Only

	Yes	No	Some
Do you speak Farsi?			
Do you understand Farsi?			
Can you read Farsi?			
Can you write Farsi?			

Tuition Fee including book

Tuition for the whole year, September thru May is \$700.	Tuition for each semester is \$350.
*\$50 discount is applicable for each additional student per family per semester.	
Registration Date(s): ____ Semester 1 – September –December ____ Semester 2 – January-May	

Please initial, sign and date

_____	I will commit to attend all classes except for emergency or serious conflicts.
_____	As a parent, I will become involved in PTA and school affairs as expected.
_____	I will follow all the guidelines and respect the rules for Persian School. Teachers, Coordinators of ICSNC Persian School, Persian School location and Iranian Cultural Society of NC, Inc. (including its members and Boards of Directors) are not liable or responsible for any personal injuries that occur on the premises during classes.
_____	(optional) I wish to become a member of Iranian Cultural Society of NC. I understand ICSNC has no Political or Religious affiliation. My yearly \$48 membership fee is attached.
Signature: _____	Date: _____

Office Use Only (Please do not write below. A minimum of 3 students are required to form a class.)

ICSNC Member (Y/N) _____	Tuition Fee Received by _____		
Check Number _____	Tuition Amount _____	Membership Amount _____	
Placement for	Speaking/Listening	Reading/Writing	Tested by
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
Teacher			
Comments _____			