

**ANNOOR ACADEMY OF CHATTANOOGA**

2533 Gunbarrel Road  
Chattanooga TN. 37421  
Phone: 423-894-1637  
Fax: 423-894-1638

Operated by Islamic Society of Greater Chattanooga (ISGC)

***New Student Application 2023-2024***

Student's Name: \_\_\_\_\_  
Last First Middle

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

\_\_\_\_\_  
City State Zip Code Home Phone

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Birth Certificate No. \_\_\_\_\_

Student's Gender: Male / Female Child's Race (White/Asian/Black/Hispanic): \_\_\_\_\_

**Father's Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

Address (if different than students): \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone No.: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

Address (if different than students): \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone No.: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

**Guardian's Name** (if different than Mother/Father): \_\_\_\_\_

Address (if different than students): \_\_\_\_\_

Person to contact in case of an emergency other than parent: \_\_\_\_\_  
Name Phone No.

**Agreement**

I understand the rules and policies of Annoor Academy of Chattanooga (AAC) and hereby give my consent to enroll my child. I assume full responsibility for payment of all fees (including late fees) and regular attendance of my child at the school. I understand that the registration fee is nonrefundable. I am willing to support the activities of the parent committee and Annoor Academy of Chattanooga.

Form completed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Please Print Name

Signature: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_