



Alhuda Academy 248 East Mountain Street, Worcester, MA 01606

P.O. Box 4040 T/S, Shrewsbury, MA 01545, Phone (508) 854-4700, Fax (508) 854-4711 www.alhudaacademy.org

Date Received: _____

Fee Received: _____

Re-Enrollment Form 2007-2008 School Year

Family Name _____

Home Address _____

City _____

State _____

Zip Code _____

Telephone _____

Student's Name:

Grade Level:

Date of Birth:

Tuition Deposit:

1 _____ \$ _____

2 _____ \$ _____

3 _____ \$ _____

4 _____ \$ _____

Please sign and return this form to Alhuda Academy, along with a deposit amount of \$200 for each child re-enrolled, by no later than Wednesday, February 28th. Priority will be given to the students currently enrolled. However, if you do not re-enroll your child before the deadline, we will not be able to guarantee a spot for your child/children after we open enrollment to the public. Registration will then be on a first come, first served basis. So, please get your re-enrollment form in as soon as possible!

Parent's Signature

Please Note: an application will not be considered complete without the deposit check of \$200 for each child re-enrolled.