



Masjid Al-Tūbā

PANORAMA

Early Learning Center

1 Wendy Way, Panorama
Cape Town 7500

info@panoramamasjid.co.za
www.panoramamasjid.co.za



APPLICATION FORM

DATE OF APPLICATION:..... YEAR APPLYING FOR:.....

CHILDS NAME & SURNAME : DATE OF BIRTH:.....

CHILD'S CURRENT AGE : CHILD'S GENDER:.....Male / Female

HOME ADDRESS:.....

HOME TEL. NUMBER:.....

HOME LANGUAGE:.....

MOTHER'S NAME & SURNAME:.....HOME TEL:..... CELL:.....

MOTHER'S OCCUPATION:.....

EMAIL ADDRESS:.....

FATHER'S NAME & SURNAME:.....HOME TEL:..... CELL:.....

FATHER'S OCCUPATION:.....

EMAIL ADDRESS:.....

CHILD'S ALLERGIES/ MEDICAL CONDITIONS WE NEED TO BE AWARE OF:

.....
.....
.....

MEDICAL AID NAME:.....MEDICAL AID NUMBER:.....

PRINCIPLE MEMBER:.....

FAMILY DOCTOR:.....TEL:.....

OF CHILDREN IN FAMILY:.....POSTION OF CHILD: OLDEST/MIDDLE/YOUNGEST.....

Who will drop child in the morning:.....

Who will fetch child in the afternoon:.....

Name and Telephone number of the person to be contacted should the parents not be available in case of an emergency:.....TEL:.....

Please See checklist on Next Page

The Executive, Trustees and Imaamat of Masjid-Al-Tūbā | Panorama (PMCT)

Parow Muslim Community Trust (PMCT) - PBO No. 930028445

Executive Committee: Asger Khan (Chairman), Shavaan Jardine (Vice-Chairman), Ya'eesh Cader (Secretary), Ebrahim Parker (Treasurer), Ashraf Vanker (Assistant Secretary), Khalid Khan (Assistant Treasurer), Fawza Essa, Hamid Khan, Nadeem Khan, Ahmed Patel

Trustees: Dr Abdul Rahim Ashtiker, Noor Mohammed Fakie, Abdul Qayyum Kader, Farouk Pangarker, Rafiek Parker, Faried Salie

Imaat: Moulana Waseem Hendricks

Application Checklist – Please tick that the following information has been submitted with your application. Incomplete applications cannot be processed.

	Tick
Birth Certificate of Applicant	
Living Parents Identify Documents	
Utility Bill or rental agreement (3 mnths old)	

Should my application be successful my preferred mode of communication would be:

WhatsApp OR Email OR Phone Call:

Please refer to the prospectus for more detail.

I the undersigned declare the above information to be true and correct and acknowledge that I undertake to understand the prospectus which includes the institutions rules, indemnities, hours of operation and fees and commit to abide thereby should my application be successful.

PARENT/ GUARDIAN NAME :.....

SIGNATURE :.....

DATE & PLACE:.....

POPI disclaimer: Any information provided will only be used and stored for purposes related to the application.

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