

Centre Registration Form



Reg. No.

USE CAPITAL LETTERS ONLY

Date

Name of Centre

Name of Committee

Trust

Society

Organization

Other

Registration No

Year

Name of President
/ Chairman

Mobile

E-mail

General Secretary

Mobile

E-mail

Registration No. of Madrassa / School allotted by Educational Board :

Official Address:

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

District

State

Pin Code

Landphone No

Mobilephone No

E-mail

Web Site

No of Students

No of Teachers

Name of Principal

Mobilephone

E-mail

Name of Manager

Mobilephone

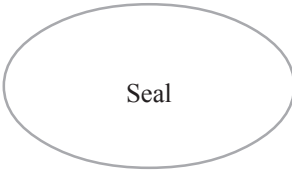
E-mail

Declaration

We hereby declare that the details furnished above are true and correct. We agree to abide by the rules and regulations of Islamic Educational Board

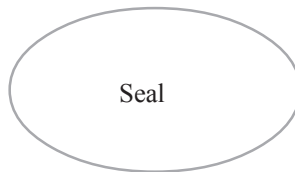
Signature

President/Chairman



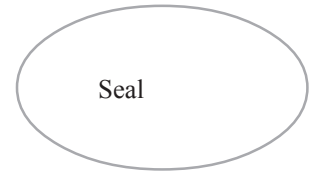
Signature

General Secretary



Signature

Secretary
Unit Muslim Jama'at/SYS



Official use only

Centre Registration No :

Certificate issued on :

Form Received on

Fee Remitted on

Amount

Receipt Number

Authorized Signatory