



73 South Fullerton Avenue, Montclair, NJ 07042, 973-509-2822  
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# STUDY GROUP

## STUDENT REGISTRATION FORM

(Please, one form per student)

Name of Student: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Email Address: \_\_\_\_\_

Student Cell Phone: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Parent Cell Phone: \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

### List by priority:

Course 1: \_\_\_\_\_

Course 2: \_\_\_\_\_

Course 3: \_\_\_\_\_

In the event of an emergency, contact: \_\_\_\_\_

Home # (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cell # (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**I grant permission for my child to participate in the IMANI  
Study Group Program**

\_\_\_\_\_  
Please Sign

\_\_\_\_\_  
Date

**Study Groups meet at the Public Library, 50 South Fullerton Avenue on Sundays 2pm-4pm**

**\*Registration Fee: \$50.00/year**

Amount enclosed: \_\_\_\_\_  
(Please make checks payable to: IMANI Programs)

For more information regarding Study Group, please contact the IMANI Office at 973-509-2822 or [info@imaniprograms.org](mailto:info@imaniprograms.org)