Al-Noor

Orphanage and Charitable Organization

Removal of Child(ren) from Al-Noor

To Whom It May Concern:

___/___/200_

This is to certify that I, Mr / Mrs/ Ms _____
Residing at: _____
_____

Possessing Identity Card No: / Passport No: _____
Hereby declare the below mentioned child(ren) has been handed to me in

health and sound mind at my request, to take him (them) safely home/ to his (their) mother/ guardian / out for _____ hours.

I hereby declare that I am connected to this child(ren) by way of:
Visitor to Al-Noor/ Guardian / Mother / _____
and further more acknowledge with immediate effect that Al-Noor is no longer responsible for the welfare of the child(ren) until and unless taken in Al-Noor.

Child's Name	Date of Birth
–	
–	
-	
-	

Al Noor member initial:_____

Al-Noor

Orphanage and Charitable Organization

Name of person taking child(ren)	Name of Al Noor Witness (2 needed)	Date	Time	Signature

Please fill below once the child(ren) come back.

Date and Time back: _____

Brought by: _____ Signature:_____

Al-Noor official Name and Signature:_____

Al Noor Members use only:

Approved by 2 members :

Name: _____ _____

Signature _____ _____

Position: _____ _____

Date: _____ _____

Comments: _____ _____