****

**al mu’min**

nikâh service WhatsApp group

the halâl choice

**Head Office**

118 Manningham Lane, Bradford, West Yorkshire, BD8 7JF

**Tel:** 01274 308456 **Email:** nikah@jkn.org.uk

(Mon-Fri 11am to 2:00pm)

Registration Form

1. **Please read the terms and conditions carefully before registering (see section 5: Terms & Conditions, in the attached ‘Important Information About the Service’ sheet). Accepting membership means that you agree to abide by the Terms & Conditions outlined in the document. Members will be updated with any changes made.**
2. **Complete the form online. DO NOT FILL IN BY HAND.**
3. **Do not leave any spaces blank.**
4. **Pay the £50.00 membership fee (see section 3: Membership Fee & How to Pay, in the attached ‘Important Information About the Service’ sheet).**
5. **Email both the form and an attached receipt as a proof of payment**
6. **After receiving your form, you will be given a unique Reference Number which you must retain whenever you contact us.**

**AMNS Registration Form Reference Number:**

**Personal Details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **First Name(s)** | **Surname** | **Address** | **Town/City** | **Post Code** |
|  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Your Contact Number:**  | **Would you like us to share your contact number onto the potential person?** | **Email** |
|  | Yes 🞎 No 🞎 |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Gender** | **Date of Birth** | **Age** | **Place of Birth** | **Nationality** |
| Male 🞎 Female 🞎 |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Height** | **Complexion** | **Build** |
|  |  | Slim 🞎 Average 🞎 Heavy 🞎 Other: ……………………………… |

|  |  |  |
| --- | --- | --- |
| **Ethnicity (e.g. Mirpuri)** | **District (e.g. Gujrat)** | **Language(s) Spoken** |
|  |  |  |

|  |  |
| --- | --- |
| **Disabilities (if any)** | **Illnesses (if any)** |
|  |  |

**Parental Consent**

|  |  |
| --- | --- |
| **Parent’s Consent? (sisters only)** | **If No, please give details…** |
| Yes 🞎 No 🞎 |  |

|  |  |
| --- | --- |
|  **Who will correspond on your behalf (if any)?** | **Contact number of the person speaking on your behalf: (this will be forwarded onto the potential person).** |
|  |  |

**Education & Qualification Details**

|  |  |
| --- | --- |
| **Education (where did you study or are studying?)** | **Qualification(s) obtained** |
|  |  |

**Employment Details**

|  |
| --- |
| **Your current Employment status (what you do)**  |
|  |

**Hobbies**

|  |
| --- |
| **Hobbies / Interests** |
|  |

**Religious Status (tick or shade the relevant box)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Practising Islâm?** | **Punctual in Salâh?** | **Punctual in Fasting?** | **Performed Hajj?** | **School of Thought?****(i.e. Hanafi)** |
| Yes 🞎 No 🞎 Trying 🞎 | Yes 🞎 No 🞎 | Yes 🞎 No 🞎 | Yes 🞎 No 🞎 |  |

|  |
| --- |
| **Level of Islamic Knowledge (please provide details)** |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| **If Male:****Do you have a beard?** | **If Yes,****what is the length?** | **If Female:****Do you wear the Headscarf?** | **If Female: Do you practise Hijâb (inc. Niqâb)?** |
| Yes 🞎 No 🞎 | Long 🞎 Fist 🞎 Short 🞎 | Yes 🞎 No 🞎 | Yes 🞎 No 🞎 |

**Additional Information (Family, Marital Status & Personal Character)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Do you own a house?** | **Do you live with parents?** | **Do you own a car?** | **Do you smoke?** |
| Yes 🞎 No 🞎 | Yes 🞎 No 🞎 | Yes 🞎 No 🞎 | Yes 🞎 No 🞎 |

|  |
| --- |
| **How many brothers and sisters are you? Include whether you are the eldest, youngest etc and whether their living with you or not. (if married then living with you or separate).** |
|  |

|  |  |
| --- | --- |
| **Marital Status** | **Please provide details of previous marriage/divorce (if any)** |
|  |  |

|  |
| --- |
| **If you have children, please provide information (inc. age, gender and custody etc.)** |
|  |

|  |
| --- |
| **Please describe your character (briefly) or how your friends will describe you.**  |
|  |

|  |
| --- |
| **Any other information you would like to tell us about?**  |
|  |

|  |
| --- |
| **Previous Criminal Record** |
| No 🞎 Yes 🞎 If Yes then please specify...................................................................................................................................................... |

**Prospective Partner’s Details**

|  |  |
| --- | --- |
| **Age** | **Islamic Values** |
| From ………. to ………. | Practising 🞎 Trying 🞎 Not Practising 🞎 Doesn’t Matter 🞎 |

|  |
| --- |
| **Level of Islamic Knowledge (please specify)** |
|  |

|  |  |  |
| --- | --- | --- |
| **Height** | **Complexion** | **Build** |
|  |  | Slim 🞎 Average 🞎 Heavy 🞎 Other: ………………… |

|  |  |  |
| --- | --- | --- |
| **Ethnicity** | **Language(s)** | **Employment Status** |
|  |  |  |

|  |
| --- |
| **Education Level** |
|  |

|  |  |
| --- | --- |
| **Would you consider a divorcee?** | **Would you consider a widow/widower?** |
| Yes 🞎 No 🞎 | Yes 🞎 No 🞎 |

|  |
| --- |
| **Would you consider a person with children?** |
| Yes 🞎 No 🞎 |

|  |
| --- |
| **Please include any additional requirements and qualities you would like your prospective partner to have:** |
|  |

**Contact Details of Referee (Optional)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Address** | **Post Code** | **Contact Number** |
|  |  |  |  |

**Declaration**

**IMPORTANT:** Before you sign below you **must** carefully read and understand the Terms & Conditions of AMNS.

1. The information I have given on this form is true and accurate to the best of my knowledge. I understand that my registration will be terminated if I have given any false information.

2. I have read or had explained to me and understand everything on this form.

3. I have read carefully and accept to abide by the Terms and Conditions of using Al Mu’min Nikâh Service.

|  |  |  |
| --- | --- | --- |
| **Signature of Applicant:** | **(Please PRINT your name here):** | **Date:** |
|   |  |   |

Email the application form and also attach a receipt as a proof of payment of the **£50.00** registration fee to nikah@jkn.org.uk

**For Official Use Only**

|  |  |  |
| --- | --- | --- |
| **Client Ref No.** | **Date Form Received** | **Registration Fee Received** |
|  |  |  |

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| --- |
|  **NOTES:**……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |

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