



ISLAMIC FOUNDATION OF TORONTO

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FORM FOR QARZ-E-HASANAH (INTEREST FREE LOAN)

I would like to give Islamic Foundation of Toronto \$ _____ as qarz-e-hasanah. Initially this loan is for a period of _____ months.

Details for the Issuance of the Qarz-E-Hasanah Certificate

Please fill in CAPITAL LETTERS

Last name _____ First name _____

Mr. Mrs. Miss

Street _____ Unit# _____

City _____ Province _____ Postal code _____

E-mail _____

Phone# _____ - _____ - _____ ext. _____ Cell# _____ - _____ - _____

In the Event of My Death the Following is(are) the Beneficiary(ies)

Please fill in CAPITAL LETTERS

1. Last name _____ First name _____

Mr. Mrs. Miss

Street _____ Unit# _____

City _____ Province _____ Postal code _____

E-mail _____

Phone# _____ - _____ - _____ ext. _____ Cell# _____ - _____ - _____

2. Last name _____ First name _____

Mr. Mrs. Miss

Street _____ Unit# _____

City _____ Province _____ Postal code _____

E-mail _____

Phone# _____ - _____ - _____ ext. _____ Cell# _____ - _____ - _____

Signature _____ Date signed _____
Applicant *yy/mm/dd*

FOR OFFICE USE ONLY

Receipt# _____ Date *yy/mm/dd* _____ Qarz-e-Hasanah certificate# _____

Refund by cheque# _____ Date *yy/mm/dd* _____

Please submit your completed form to Islamic Foundation of Toronto Room - 104