THE LONDON CENTRAL MOSQUE TRUST & THE ISLAMIC CULTURAL CENTRE

146 Park Road, London NW8 7RG.

Tel: 020 7725 2206 Fax: 020 7724 0493 Email: registrar@iccuk.org Website: www.iccuk.org

A Registered Charity



Islamic Divorce Booking Form*

Date			ime	
		1		
Details		Husband		Wife
Surname (Last Name)				
First Name				
Date of Birth				
Telephone				
Address	UK			
	Overseas			
	UK Resident?	Yes	No	Yes No
Nationality				
Passport Number				
Born Muslim?		Yes No (E	mbraced)	Yes No (Embraced)
Islamic	Marriage Certific	cate (Nikah) D	etails	
Full Name 8	& Address of Mosque/C	Centre		
Certificate 1	Number			
Date of Isla	mic Marriage / Civil Re	egistry		
Names of the Two Muslim Male Witnesses				
1 st Witness			2 nd Witness	
Nationali	ty		Nationality	
	·		•	
Official Us	se Only			
Submitted	Supporting Docume	ents		
Islamic Mar	riage (Nikah) Certificat	e Husb	and's Passport	Wife's Passport
Witness (1) Passport		Witne	ess (2) Passport	
Processing Fees				
Date			Amount	
Registrar's s	signature		1	

^{*} Note: This is only a booking form and <u>NOT</u> a certificate or confirmation of Islamic Divorce.