

**MATRIMONIAL PROFILE**  
The Straight Path Islamic Center

First Name: \_\_\_\_\_ Middle initial \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Country & City of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_ Status in Canada: Citizen Landed Immigrant, or Other

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Any Health issues: \_\_\_\_\_

Language (s) spoken at home: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Tel No. \_\_\_\_\_

Parents Name: \_\_\_\_\_ / \_\_\_\_\_

Preferred Means of Contact: Email / Telephone

Other \_\_\_\_\_

Educational background:

Specify designation: Degree Diploma Other: \_\_\_\_\_

Name of Institution and the City: \_\_\_\_\_

Year of Completion \_\_\_\_\_

Current Occupation/Position: \_\_\_\_\_ Employer \_\_\_\_\_

Religious Affiliation (Sect/School of Thought) \_\_\_\_\_

Were you ever married before: \_\_\_\_\_

If so, state when \_\_\_\_\_ Current status \_\_\_\_\_

What Traditions or Ideals do you follow: Islamic or Cultural

If you follow Cultural Values, state what Culture would that be?

\_\_\_\_\_

State top five (5) qualities that you wish to see in your future spouse:

\_\_\_\_\_

\_\_\_\_\_

I, \_\_\_\_\_ hereby certify that the above information provided by me in this form are true, correct and complete.

\_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

**Disclaimer:**

*The information provided as above is submitted to us by the client and it is not our role to verify it. We are not responsible for the veracity of this information. We strongly recommend you to thoroughly research this info before making any important decision.*

Administration Fee \$ 50.00

\*Available for Registration in **SPIC** Office every Thursday and Friday.

*(By Appointment Only)*

Contact: **info@thestraightpath.ca**

*\*Matrimonial Committee*

**The Straight Path Islamic Centre**

13-105 Kennedy Road South Brampton, ON