

ISLAMIC ASSOCIATION OF LONG ISLAND, INC.

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www.seldenmasjid.org

Selden Masjid Funeral/Janazah Services Policy and Rules

1. Selden Masjid will not schedule or provide any Funeral/Janazah related service(s) until this form is submitted by the next of kin to either the Chairman of the funeral Committee or the President of Islamic Association of Long Island, Inc ("IALI"). Please submit this form as soon as the funeral home is notified.
2. Funeral/Janazah prayer will be performed **ONLY IN** designated areas. Please contact IALI representative if you have any question.
3. Dead body (Mayyit) will **NOT BE** allowed inside the main Musallah (main prayer hall).
4. Relatives and friends of the deceased attending the Funeral/Janazah services must stay in designated areas of the Masjid only and must behave in an orderly manner:
 - a. Befitting common decency and Masjid etiquettes.
 - b. With utmost respect to other scheduled services at Selden Masjid to not cause any disruption.
5. **NO** follow-up use of facilities after the funeral to serve food unless it is booked separately in advance using the Facilities Usage Request Form (**NOT GUARANTEED AND ONLY AVAILABLE FOR THE SELDEN MASJID COMMUNITY.**)

Name of the deceased: _____ Date of death: _____

Legal Address of the Deceased: _____

IALI reserves the right to grant, deny or cancel any or all requested services.

Requested Services:

- Funeral/Janazah Prayer
- Need someone from Selden Masjid to lead the Janazah prayer

PLEASE NOTE THAT THE FOLLOWING SERVICES ARE ONLY AVAILABLE FOR SELDEN MASJID COMMUNITY, RESIDING WITHIN 10 MILES OF THE MASJID, AND IALI MEMBERS & THEIR IMMEDIATE FAMILY MEMBERS.

- Ghusl/Kafan (Body Wash/Shroud)
- Need someone to accompany the Janazah to the cemetery (please provide a reasonable hadiya to the designated person directly)

I hereby agree to above-mentioned Funeral/Janazah Services Policy and Rules. Furthermore, I will ensure that everyone in attendance (friends and family members of the deceased) fully understand this policy and rules and will abide by such policy and rules, any individual in violation will be asked to leave the premises.

Name of Next of Kin: _____ Signature: _____
(person requesting the service)

Address of Next of Kin: _____

Relationship to the Deceased: _____ Date: _____ Phone: _____

Email the completed/signed form to info@seldenmasjid.org (full page scan or legible picture of the entire page)