Shahaadah Record

| <u>Details of Observer</u> |
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| ☐ Male ☐ Female Age ☐ ☐ ID/Passport No.: ☐ ☐ |
| Name: Address: |
| Contact Number: |
| Crescent Observation |
| Date: DD/MM/YYYY Time: PM Location: PLACE PROVINCE |
| Type of Observation: |
| ☐ Naked Eye ☐ Binoculars ☐ Binoculars (then naked eye) ☐ Telescope ☐ Telescope (then naked eye) |
| Weather Conditions: |
| ☐ Clear ☐ Cloudy ☐ Partly Cloudy ☐ Rain ☐ Misty ☐ Other (Specify) |
| How often has this Observer given Shahaadah? |
| ☐ Frequently ☐ Sometimes ☐ First Time |
| Orientation of Crescent (please select the nearest match by circling the image): |
| Position of Crescent: |
| ☐ Right of Sunset ☐ Left of Sunset |
| Crescent Observed? |
| ☐ Yes (Personally by the one Reporting) ☐ No |
| I have personally interacted with the Observer, obtained his/her Shahadah (testimony) and I am forwarding my findings to the Wifaqul Ulama Moon Sighting Committee. |
| I understand that Shahadah (testimony) and Khabar (News) are two separate entities in Islamic Shariah and there a specific rules of receiving, verifying, and forwarding Shahadah (testimony). Khabar (News) is just information and complete the spread using the traditional means only once it has been verified. |
| I also understand that my function is to forward this Shahadah (testimony) to the Wifaqul Ulama Moon Sighting Committee and I don't have the power to make a decision based on this verification for the Muslims of South Afric |
| I also understand that this information is confidential and will not make it public. |
| I have confirmed with(name of observer) and received their consent that the information as contained in this form can be made public if their Shahadah (testimony) is accepted (by the Committee). |
| Comments (confidential): |
| Name of person taking Shahaadah: |
| Signature: Date DD/MM/YYY |

WIFĀQUL 'ULAMA ASSOCIATION OF SOUTH AFRICAN 'ULAMA