

Registration for American Sign Language

Offered by The Holley Institute at St. John Hospital & Medical Center

Please Print Clearly

Name _____ Home Phone _____ Cell _____

Street _____ City _____ Zip _____

SJ Health System Associates: Facility/Hospital _____ Dept Name _____

Work Phone _____ Fax _____ Email _____

Not a SJ Health System Associate: in the event a class is changed, how may we contact you during the day?

Place of employment _____

Work Phone _____ Fax _____ E-mail _____

Please Select your Class of choice:

I would like to enroll in Beginning ASL, MONDAYS at St. John Hospital & Medical Center

I would like to enroll in Intermediate I ASL, MONDAYS at St. John Hospital & Medical Center

I would like to enroll in Intermediate II ASL, TUESDAYS at St. John Hospital & Medical Center

I would like to enroll in Intermediate III ASL, TUESDAYS at St. John Hospital & Medical Center

Please complete the following:

- My payment of \$45 is enclosed. _____ (Beginning ASL - Mondays)
- My payment of \$30 is enclosed. _____ (SJH Employees taking Beginning ASL)
- My payment of \$45 is enclosed. _____ (Intermediate I ASL - Monday)
- My payment of \$45 is enclosed. _____ (Intermediate II ASL - Tuesday)
- My payment of \$45 is enclosed. _____ (Intermediate III ASL - Tuesday)
 - I will need to purchase a book Yes No (circle)
 - Payment for the book is enclosed. _____ (\$33)

Beginning students are encouraged to purchase books before classes start – it is also recommended that they enroll with a friend for practice purposes.

Preferred method of Registration:

*Call St. John Health Connect at **866.501.DOCS** and **pay by credit card** (before September 4, 2009), or, if necessary

Return this page with full payment (before Friday, September 4, 2009).

Make checks payable to: **The Holley Institute**

[Please let us know if you must cancel your registration. No Refunds.]