

## 'Level B' Beginner ASL Classes Registration Form

Dr.     Mr.     Miss     Ms.     Mrs.

First & Last Name: \_\_\_\_\_

Street, Box Number: \_\_\_\_\_

City, Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: Voice/ TTY: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Occupation: \_\_\_\_\_

**TO TAKE LEVEL 'B' YOU MUST have completed Level A and KNOW how to sign numbers, alphabet, colours, pronouns, short phrases as well as hand shapes and animated movements.** This level will increase your confidence by learning that it takes ongoing comprehending, receptively and expressive signing skills to ASL.

**Registration form signed** and **payment** is required to confirm registration.

Payment maybe completed online, mailed (cheque or money order made payable to CHHA-Edmonton) or brought to the office during office hours. Office hours have changed for the summer. Please phone first: (780) 428-6622 or (780) 428-6624.

**CHHA - Edmonton Branch #10, 12122 - 68 Street Edmonton, AB ,T5B 1R1**

PayPal (Online)     Cheque/Money order     Cash (do not mail)   
Amount: \$ \_\_\_\_\_

Confirmation of registration will be emailed. Receipts for payment (if required) provided first class.

We ask you provide to the following information in order to provide this serve to you, and comply with the provisions of various legislation, including the *Personal Information Protection Act*:

**I hereby consent to:**

- CHHA-ED using my name and/or image on the CHHA-ED website, newsletters, and brochures for promotional and information purposes.
- CHHA-ED using electronic email as a main means of communicating with me

**Please sign and date if you give consent:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Canadian Hard of Hearing Association - Edmonton Branch (CHHA-ED)  
#10, 12122 - 68 Street, Edmonton, Alberta T5B 1R1  
FAX: (780) 428-6622

Phone (Voice or TTY): (780) 428-6622

E-mail: [info@chha-ed.com](mailto:info@chha-ed.com)  
Website: [www.chha-ed.com](http://www.chha-ed.com)