

YWCA REGISTRATION FORM

Adult & Continuing Education Please print all information

PERSONAL INFORMATION

Name:						
Name: First		Sex:	Famala	Last Male		
Date of Birth.	e of Birth: Date/month/year					
Address:						
Tel. (home):		_ Tel (work):		Ce	ll:	
Email address:					-	
COURSES Please tick the class	s (as) vou ar	o interested in takin	na:			
riease tick the class	s (es) you ar	e interested in takin	ng.			
		Sewing		Mondays	and Wednesdays 5:30-7:30pm	
		Cake Decorating		Monday &	& Wednesday 5:30-7:30pm	
		Food Preparation		Tuesdays	and Thursdays 5:30-7:30pm	
		Food Preservation		Tuesdays	and Thursdays 5:30-7:30pm	
		Cosmetology		Tuesdays	and Thursdays 5:30-7:30pm	
	English as a Secon		d Language (ESL) Mondays-Wednesdays 6:00-7			0pm
		Computer (Basic)		7	Cuesdays and Thursdays 3:00-4:00)-pm
Have you previously						
If yes, which class (e	s)?					
<u> </u>	Sewing, comp	outer, Cake Decoratin	_		on-refundable. Tuition is due at th Food Preparation tuition is \$70.00	
I hereby agree to the continue my course of					not made accordingly, I will not beable.	allowed to
Signature:				Da	ite:	
For Administration Amount received:	•	Metl	hod of navr	nent:		
Date received:		Rece	eived by:			