



# ADULT REGISTRATION FORM

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Legal name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Address: \_\_\_\_\_

Sex: M/F      Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency contact I authorize the following individual to serve as an emergency contact (must 18 or over):

Name: \_\_\_\_\_ cell phone: \_\_\_\_\_

Class selection Language Program

Language Arts/Spanish Class name: \_\_\_\_\_

Day: \_\_\_\_\_ Time: \_\_\_\_\_

Location: \_\_\_\_\_

## Class policies

All fees are non-refundable. All classes require sufficient enrolment to convene, and the AAC Aprendiendo a Colors, LLC (Learning through Colors) reserves the right to cancel, reschedule, combine classes or change instructors if necessary. I understand that I will receive a refund for the portion of classes remaining in case the course is cancelled due to extenuating circumstances. I do hereby acknowledge that I understand the class selection, reservation and pricing policies of the AAC Aprendiendo a Colors, LL (Learning through Colors), and will comply with this policies.

Printed name: \_\_\_\_\_



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

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