



JAMAICA ASSOCIATION FOR THE DEAF
JAMAICAN SIGN LANGUAGE & DEAF CULTURE CLASSES - COMMUNITY LEVEL
REGISTRATION FORM

Please complete the registration form below. Our classes are scheduled on cycle at least three times per year with start dates usually in January, June and September.

General information

Name: _____ Gender: _____
 First Name Last Name

Date of birth: _____ Occupation: _____
 (day/month/year) Place of work: _____

Address: _____ Parish: _____

Contact number: _____ Email address: _____

Emergency contact: _____
 Name Telephone (text only: Yes/No)

Class information

Which class are you registering for? Level 1 Level 2

How did you hear about these classes

<input type="checkbox"/> Attended a previous class	<input type="checkbox"/> Volunteered with JAD
<input type="checkbox"/> Advertisement	<input type="checkbox"/> A friend/family member
<input type="checkbox"/> Deaf Community Member	<input type="checkbox"/> JAD Staff
<input type="checkbox"/> JAD Facebook	<input type="checkbox"/> Personal inquiry
<input type="checkbox"/> Other; explain	<input type="checkbox"/> Flyer; where

Prior Learning Information

1. Have you ever interacted with a Deaf person before? Yes No Unsure
2. Have you been introduced to sign language before? JSL Country Sign No
 ASL Other
-
3. Have you been trained in sign language before? ASL Country Sign No
 JSL Other
-

Where were you trained? _____ When? _____

Payment plans

- I will make the required payment of \$12,000 in full.** I understand that this amount is expected to be paid and the receipt for payment presented on or before the first day of class.

- For the additional fee of \$500, I will make the required payment of \$12,500 in 2 parts.** I understand that the first instalment of \$6,500 is expected to be paid, and the receipt for payment presented on or before the first day of class. I also know that the second payment of \$6,000 is expected to be paid by the sixth class.

Important:

- 1. Manuals and DVDs will not be given to students who have not paid the full course cost.**
- 2. Students who do not make full payment by the 5th class will not be evaluated.**

Other information

Please note any special considerations that you would like us to note when placing you in a class or meeting your learning needs. (Will you need any special accommodations? Which of our three start dates would you prefer?)

Student Name

Signature

Date

N.B. NO REFUNDS WILL BE PROCESSED AFTER YOU HAVE ATTENDED THREE CLASSES.