

EHBA APPLICATION

Asociación Bilingüe Hispánica de Edmonton
Edmonton Hispanic Bilingual Association

REGISTRATION – NEW

One form per person. Complete all sections.

Read "School Policies" on the back of this form before signing at the bottom.

Cheques payable to "EHBA" or "Edmonton Hispanic Bilingual Association"

All prices include GST (Registration 860336783).



REGISTRATION SESSION YEAR 20 ____ (check appropriate session) <input type="checkbox"/> Fall (Sept – Dec) <input type="checkbox"/> Winter (Jan – April) <input type="checkbox"/> Spring (April - June)										FOR OFFICE USE ONLY TUITION FEES					
										Adult	\$190.00				
										Senior (65& up)	\$120.00				
										Child/Youth	\$140.00				
CONTACT INFORMATION										COURSE MATERIALS					
Last Name			First Name							New Full Kit		\$ 150.00			
Address			City/Town												
Postal Code			Telephone												
E-mail															
Occupation / Interests:															
Any allergies/medical conditions that we should be aware of:															
I previously took Spanish (where, level, when)?															
ADULT COURSE REQUESTED (PLACE AN 'X' IN THE BOXES)															
DAY OF WEEK		<input type="checkbox"/> Tuesday (7:00-9:30pm)					<input type="checkbox"/> Saturday (10:00-12:30pm)								
PROGRAM		<input type="checkbox"/> Adult/Teen					<input type="checkbox"/> Senior (65&up)						Total Materials		\$
LEVEL		1	2	3	4	5	6	AR	C1	C2	Tuition		\$		
If registering in 2 different classes (must pay 2 tuition fees in order to take 2 classes)				TUE LEVEL				SAT LEVEL							
CHILDREN / YOUTH PROGRAM SATURDAYS ONLY												\$			
PARENT OR GUARDIAN'S NAME												\$			
CHILD OR YOUTH'S CURRENT AGE							EMERGENCY PHONE NUMBER					TOTAL		\$	
Is the child or youth currently taking any Spanish programs? (circle) Yes No															
If yes, for how long? Where?															
Does the child or youth speak Spanish at home on a regular basis?															
I first learnt about these Spanish courses through: (CIRCLE ALL BOXES that apply)										NOTES:					
Word of mouth, from:		Advertisement: Printed / Online				The Web / Phone Books									
EHBA student: former /current		Friend/relative Colleague, Other:		Edmonton JOURNAL:		METRO / VUE		Google		TELUS pages					
				EducSupplement Country Asides		Gateway (UofA)		EHBA: poster or brochure		EHBA Website		CAN pages			
IMPORTANT! All information presented on this application form will be added to our secure internal database. We do not sell, give, or share information with 3 rd parties. All information is only for EHBA use. By signing this form, I have read, understood and agree to the terms and conditions contained in the EHBA "School Policies" stipulated on the back page.															
IMPORTANT ! PLEASE SIGN HERE:						DATE:			PAID STAMP & DATE						

