

Indiana Association of the Deaf
American Sign Language Program 2010-2011
Coordinator – Wanda Kirby KirWane06@aol.com

Class Location:

Indiana School for the Deaf
1200 E. 42nd Street
Indianapolis, IN 46205

Correspondence Address:

Wanda Kirby, IAD ASL
4603 Common View Circle
Indianapolis, IN 46220

Class Schedule

Registration is 6:00 pm the same evening as the first class. All classes are Monday or Tuesday (choose one) from 6:30 pm to 8:30 pm and continue for ten weeks.

Monday first class Last class

Sept 14, 2009 Nov 16, 2009
Jan 11 2010 Mar 15, 2010
Apr 5, 2010 June 14, 2010 (Memorial Day week off)
June 21, 2010 Aug 23, 2010

Tuesday first class Last class

Sept 15, 2009 Nov 17, 2009
Jan 12, 2010 Mar 16, 2010
Apr 6, 2010 June 15, 2010
June 22, 2010 Aug 24, 2010

Certificate of participation will be issued if no more than two absences.

Tuition

Includes 20 hours of instruction
(two hours per week for ten weeks)
\$100.00 tuition (per person age 12 and up)
\$75.00 one time material fee for **Signing Naturally** workbook and DVD beginner, intermediate and advanced classes, unit 1-6). We accept cash or check payable to IAD.

Classes at your location can be arranged if you have a minimum of 8 adults attending.

ISD Parents – who have deaf son or daughter attending Indiana School for the Deaf, are interested taking ASL class. There are some rules which Indiana Association of the Deaf suggests the parents to pay first day of class \$100. After 10th weeks if you attend eight out of 10 classes will receive \$100 back. There is a limit of 4 parents, so it will be first come first serve

Return check charge: \$20.00
Refund policy – – no refund

Two Ways to Register

(see www.indianaassociationdeaf.org for form)

1. Email the following information to kirwane06@aol.com (IAD ASL in subject line) and bring payment to registration
- OR
2. Mail the following information to above the correspondence address with your registration form and payment.

Name: _____

Address: _____

City, State, ZIP: _____

Email: _____

Phone: _____

Class Preference: (check one)

Monday

Tuesday

<input type="checkbox"/>	Beginner	<input type="checkbox"/>	Beginner
<input type="checkbox"/>	Intermediate	<input type="checkbox"/>	Intermediate
<input type="checkbox"/>	Advanced	<input type="checkbox"/>	Advanced