Stillwater Area Community Services Center Inc.

Where Stillwater Comes Together P.O. Box 536; 19 Palmer Street, Stillwater NY, 12170 Phone 518-664-2515; Fax 518-664-3590; www.stillwaterareacommunitycenter.org

Baby Sign Language Class – Registration Form With Becka Marsch, licensed Baby/Toddler/Preschool Sign Language Instructor

For Babies Newborn to 1.5 Years Old

| Parent/Guardian First and Last 1 | Name: | |
|--|---|--|
| Baby's Name(s): | | Age(s): |
| Phone: | Email: | |
| Address: | | |
| Names of other Parents/Guardia | ans attending: | |
| Class starts Saturday, March 5 | 5, 10 a.m. – 11 a.m., continues | Saturdays for 8 weeks, to April 23. |
| Sign Babies Price: \$15.00 a We Family Guide; Baby Signing Bo years welcome, if room, for an a | ook; Wee Hands at Home DVD | |
| Total Amount Included: \$ Make check to: Stillwater Area Or hand-deliver to SACC, 19 Page 19 | Community Center, and mail t | o P.O. Box above. |
| How did you hear about these c | lasses? | |
| Class is limited to 10 babies. If choose to receive a full refund. Siblings can attend if there's spa | , | may be scheduled, or you can |
| by SACC and/or using equipment injury and/or damage resulting from the Town of Stillwater free and has | of said organization, each participm such participation. Each participation of any injury and or negligence on the part of said | d to participate in activities sponsored oant agrees to assume all liability for ipant further agrees to hold SACC and nd/or damage incurred as a result of organizations or its officers, agents, |
| Signature of Parent/Guardian_ | | Date: |
| If baby is sick , please do not bring Visit Becka Marsch at http://le | | may be available. ou have questions about the class. |
| Office use only Fee Paid: Cash \$ | Check # | Date Paid: |