

# American Sign Language Class Level 3



## CLASS LOCATION

**Dupont Resource Center  
2514 E. Dupont Road, Suite 210  
Fort Wayne, IN 46825**

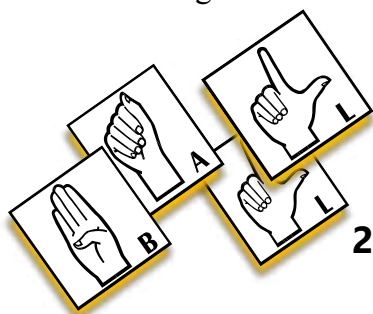
## COURSE DESCRIPTION

The instructor will guide you to build upon skills from previous instruction. This will be done through further understanding of Deaf culture while developing and learning the Level 2 basics of American Sign Language (ASL) for better communication skills. Within the course the instructor will be utilizing the book "A Basic Course in American Sign Language" to support his teachings. Mid-course there will also be a social opportunity off site during normal class time for participants to further practice their skills with a variety of individuals who are deaf.

Classes on Thursdays, 6:30-8:30pm 9/8, 9/15, 9/22, 9/29, 10/6(class held in community), 10/13, 10/20, 10/27

Students are encouraged to purchase "A Basic Course in American Sign Language" by Tom Humphries to follow along with the instructor.

### **\$65.00 PAYMENT AND REGISTRATION TO**



**The League  
c/o: DeafLink  
5821 S. Anthony Blvd.  
Fort Wayne, IN 46816  
260-441-0551 (Voice/TTY) or 260-240-8736 VP**



\*FEES ARE NON-REFUNDABLE UNLESS CLASS IS CANCELED DUE TO LOW ENROLLMENT  
\*\*REGISTRATION AND ACCOMMODATION REQUEST(S) MUST BE RECEIVED BY August 30, 2016

### REGISTRATION

Name \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Requested reasonable accommodations \_\_\_\_\_

Payment Method (check one): Check  # \_\_\_\_\_ Cash  \_\_\_\_\_

Visa  / MasterCard  # \_\_\_\_\_ Exp Date \_\_\_\_\_ 3-4 Digit CVC \_\_\_\_\_

*Note:* My signature authorizes the League to charge my credit card the amount stated above, if applicable.

### OFFICE USE ONLY:

Date Received: \_\_\_\_\_ Check Learning Account: PERSONAL  PROFESSIONAL

Staff Initials: \_\_\_\_\_ Amount Received: \_\_\_\_\_

Payment Method (check one): Check  # \_\_\_\_\_ Credit Type  \_\_\_\_\_ Cash  \_\_\_\_\_