



Language Class Registration Form

PLEASE PRINT CLEAR



2024 Term 3, 12 Aug - 3 Oct

Cost: \$95 Per Student or \$25 for Single Airmen

Student Info: First Name: _____ Last Name: _____

Email Address: _____ Best phone#: _____

Sponsor's Info: First Name: _____ Last Name: _____

Cell Phone: _____ Duty Phone: _____

Please circle your choice

| | | | |
|----------|--|---|----------|
| A | German 1 Lunch Mon – Thurs, 1100-1150, CR-1, Gudrun Garcia | French 1 Afternoon Tues &Thurs, 1300-1445, CR-1, Robert Bels | G |
| B | German 2 Lunch Mon – Thurs, 1200-1250, CR-1, Gudrun Garcia | French 2 Night Tues &Thurs, 1700-1845, CR-1, Robert Bels | H |
| C | German 3 Lunch Mon – Thurs, 1000-1050, CR-1, Gudrun Garcia | Spanish 1, Lunch Mon – Thurs, 1100-1150, CR-2, Marta | I |
| D | German 1 Night Mon & Wed, 1700-1845, CR-1, Robert Bels | Spanish 2, Lunch Mon – Thurs, 1200-1250, CR-2, Marta | J |
| E | German 2 Night Mon & Wed, 1700-1845, CR-2, Gudrun Garcia | English as a Second Language (ESL) Beg. Conversation Class, Tues & Thurs 1700-1845, Flying Pig, Jill Nelson | K |
| F | German 3 Night Tues & Thu, 1700-1845, CR-2, Gudrun Garcia | | |

Please check if you are a Single Airmen _____

Please read and initial:

- ___ Classes are held in person if not otherwise determined.
- ___ Children may not be brought to class or left unattended in the building during class time.
- ___ Students must be 18 years of age or older.
- ___ A non-refundable administrative fee of \$25 will be assessed for withdrawals.
- ___ Deadline for withdrawals is 3 days prior to start of class - no refunds can be given after deadline.
- ___ ****Full refunds only for PCS, TDY, or deployment prior to start of class – copy of orders required.**
- ___ ****Partial refund only for PCS, TDY, or deployments during term – prorated at \$11.88 per remaining full week.**
- ___ Refunds must be collected within 30 days after approval.
- ___ **Please initial if you are a Single Airmen**

- Email to ramcomcen@gmail.com will be accepted until August 9, 2024 via email. If registering after this date please bring in your form or fill the form out at the front desk in building 412

****Must have Director/Assistant Director approval before conducting refunds****

Students Signature: _____ Date: _____

FOR COMMUNITY CENTER EMPLOYEES USE ONLY

Course (Letter) _____ RecTracRcpt #: _____ Amount Paid: _____ German/French Book

Payment (circle one): cash check CC-last 4 _____ Employee's Initials: _____