

GARDENA VALLEY JAPANESE CULTURAL INSTITUTE
JAPANESE LANGUAGE SCHOOL

REGISTRATION FOR ENROLLMENT (ADULT)
Monday Class

New Student

Returning Student

Name of Student: _____
Last Name First Name Japanese Name

Address: _____
Street Address City Zip Code

Home Phone Cell Phone

E-Mail Address

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FOR NEW STUDENTS ONLY: I hereby register to this school with a registration fee of \$_____ attached to this sheet. (Please make the check payable to "GVJCI Japanese Language School".)

Signature: _____ Date: _____

I was referred to this class by (please check one):

Friends: _____

Acquaintance: _____

Media (newspaper, TV, etc.): _____

Other (please specify): _____

Registration Fee: \$60 Per New Student	Fees: \$5 for each class (drop in basis)
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For office use only		
<input type="checkbox"/> Cash	<input type="checkbox"/> Check	Check #

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