

Family Sign Classes
Request Survey

Carrie is thinking about doing more family/children's classes these will most likely be at 28 Spring Street. Checking to see if there is enough interest and when.

Name: _____ Email: _____

Age of children: _____

Circle your preferences below:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sun
--------	---------	-----------	----------	--------	----------	-----

Time of day (list time that works for you):

Morning	Afternoon	Night
---------	-----------	-------

Season that may work for you:

Fall	Winter	Spring	Summer
------	--------	--------	--------

Frequency:

1 x a week (8)	1 x a month (theme based)	2 X a month	8 weeks in summer
-------------------	---------------------------------	-------------	----------------------

What themes would you like?

Fall/ Halloween	Activities	Family	Sports	Feelings
Winter	Food	Introduction	#	Town Walk
Spring	Valentines	Opinions	Calendar	Colors
Summer	Christmas	ABC's	Animals	Verbs
Holidays	Opposites	Grammar	Games	

Any other helpful thoughts:

You may also keep an eye on my new website for future classes. People may also fill out survey there:

<https://aslbridginghandsforasl.com/>