

**Application for Saint Sophia Cathedral
Greek Adult Language Program**

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2019-2020

FALL COURSES

We welcome you to our Adult Greek Education classes. We are offering classes at the Frosene Center on Saturday starting on October 5th. Below are the class offerings. Please make sure to complete the entire form, including emergency information. Thank you.

Course Selection Schedule	
Saturday, Beginners 1	8:30 a.m.-9:30 a.m.
Saturday, Beginners 2	9:30 a.m.-10:30 a.m.
Saturday, Intermediate	10:30 a.m.-11:30 a.m.
Saturday, Conversation	11:30 a.m.-12:30 p.m.
Saturday, Advanced	12:30 p.m.-1:30 p.m.
*Saturday courses will begin on October 5, 2019 and end on January 25, 2020.	
*Course availability is subject to change dependent on total enrollment.	

Greek Adult Class Application and Payment

Name of applicant: _____

Address:

Telephone #s: Home: _____

Cell #: _____

Work #: _____

Email address: _____

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FALL COURSES

Circle desired level of
Instruction:

Beginners 1
Beginners 2
Intermediate
Advanced
Conversation & Culture

Emergency contact:

Name of person: _____ Address
and phone #s: _____

** You will be sent the text information prior to class beginning, or if registering on the first day the instructor will give you the information on title, author and purchase location of text.

- ❖ One Course per Semester: \$350.00
- ❖ Two Courses per Semester: \$600.00
- ❖ One Course per Year (Fall and Spring): \$600.00
- ❖ Conversation & Culture per Semester: \$200.00
- ❖ One Course plus Conversation: \$500.00

All classes will begin on time. If the instructor is unable to instruct, she/he will give notice prior to class start time so that no one is inconvenienced. We ask that if you are unable to attend a class due to travel, emergency, plans, etc. that you please inform the instructor prior to class.

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You may fill out the application and submit payment either by cash, check (made out to Saint Sophia Cathedral – adult Greek classes), or credit card. If using credit card please include: Card type (MC/visa) _____,

card # _____,

expiration date: _____,

Security Code Found on Back of Card near signature, (i.e.333):

_____,

name as it appears on the card and address of the cardholder:

Please send completed application form to Effie Kalapothakos via Email at saintsophiadcgreekschool@gmail.com , fax (202) 625-7173, or by mail 2815 36th Street, NW, Washington, DC 20007. You can also pay direct on the Faith Direct Website (One time Greek School Donation). You are also welcome to drop it off at the church office before the first day of class. Thank you.