

Class Registration Form – Fall 2017

Farsi Language Classes

Ages 6 to 12 years old

University High School – Irvine
Fridays (Sept. 8th-Dec.1st, 2017), 4:30-6:30 PM

Student's First Name: _____ Student's Last Name: _____

Mother's Name: _____ Father's Name: _____

Student's Date of Birth: _____

Languages spoken between parents at home; include percentage of time each is spoken (e.g., "Farsi (40%), English (50%), Spanish (10%)"):

Languages spoken BY parents with children at home; include percentage of time each is spoken.

By mother: _____ By father: _____

Languages that child speaks at home; include percentage of time each is spoken:

Home Address: _____

Home Telephone: (____) _____ Parent work telephone: (____) _____

Father's Cell phone: (____) _____ Mother's Cell phone: (____) _____

E-mail: _____ Fax: (____) _____

Parent Signature: _____ Date: _____

Please fax your application to 949-854-3136 (or scan & email to hoori@persianschool.org) and bring payment on first day of school. Checks payable to **Khayam Persian School Foundation**.