



# Winter 2023 AIL Registration Form

## Winter 2023 Registration

Name \_\_\_\_\_

Street \_\_\_\_\_ Apt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

(Please enter an email address, so we can form a contact group to disseminate information about the classes.)

Are you affiliated with a faith congregation? If so, please name:

\_\_\_\_\_

New registrants, how did you learn about Adventures in Learning Classes?

\_\_\_\_\_

\_\_\_\_\_ I am interested in volunteer opportunities with the Shepherd's Center

Make checks payable to "Shepherd's Center of Northern Virginia"  
and mail form to:

Shepherd's Center of Northern Virginia  
541 Marshall Rd SW  
Vienna, VA 22180

\_\_\_ \$55 tuition enclosed