



Registration form - 2010 - French courses

Family name : First name :

Date of birth : / / 19..... Sex : M F

Nationality : Occupation :

Passport Nr :

Address :

.....

Tel : Fax : E-mail :

Estimated level of French :

COURSES	DATES : from ____/____/____ to ____/____/____
----------------	---

<input type="checkbox"/> Standard Formula (20 lessons/week)	
<input type="checkbox"/> Intensive Formula, option : oral (20+4 lessons/week)	
<input type="checkbox"/> Option : exam (20+6 lessons/week)	<input type="checkbox"/> Delf/Dalf <input type="checkbox"/> TEF <input type="checkbox"/> CCIP
<input type="checkbox"/> Option : 4 one-to-one tuitions (20+4 lessons/week)	
<input type="checkbox"/> Option : 10 one-to-one tuitions (20+10 lessons/week)	
<input type="checkbox"/> Option : cooking (20+5 lessons/week)	
<input type="checkbox"/> Option : Medical French (20+6 lessons/week)	
<input type="checkbox"/> Stage pour Professeurs de Français (30 leçons/semaine)	
<input type="checkbox"/> Academic Formula (20 lessons/week)	<input type="checkbox"/> 6 months <input type="checkbox"/> 9 months
<input type="checkbox"/> One-to-one tuitions,	<input type="checkbox"/> 20 lessons <input type="checkbox"/> 30 lessons
<input type="checkbox"/> Senior 50+ (15 lessons/week + cultural and linguistic tourism)	
<input type="checkbox"/> French + Wine (20+ 3 sessions of 3 hours taught)	<i>Please select first a Standard or Intensive Formula for 4 weeks or more.</i>
<input type="checkbox"/> French + Internship (from 4 to 12 weeks)	
<input type="checkbox"/> Holiday Course (20+activities and excursions)	

ACCOMMODATION

- At a French host with half board
- Room + breakfast
- Room with kitchen access
- Room in a residence
- Studio at Residence standing**
- Studio at Residence standing***
- Studio at Residence standing***sup
- Room at university campus in summer
- Studio at Student residence in summer
- No accommodation

You :

- smoker
- vegetarian
- allergies, which ones :

Specific requests :

.....

.....

.....

BOOKING

I am sending 100% of total fees to book my stay of 4 weeks or less, 50% of the total fees for my stay which lasts more than 4 weeks.

Credit card

Visa Card

Master Card

Card Nr

Expiry date __/__/__

Card holder's name

I authorize Accent Français to deduct 50% 100% of the amount, it means Euro from my account.

Bank check in Euros

Bank transfer

To : Banque populaire du Midi – Agence Montpellier Comédie

Bank : 16607 Account number : 00219-09405421018/92

IBAN : FR76 1660 7002 1909 4054 2101 892 - SWIFT : CCBPFRPPPPG

I have taken note of the registration, payment and cancellation conditions.

Date

Signature

How did you hear about Accent Français ?

Internet, which website ?

Language school guide, which one ?

Alliance Française, Institut français, Centre Culturel Français... Which city ?

Other :

FRENCH LEVEL TEST

1- Présentez-vous (famille, loisirs, travail...)

.....
.....
.....

Où avez-vous étudié le Français (école, université, travail...)

.....
.....
.....

2- Que souhaitez-vous étudier pendant vos cours à Accent Français ?

.....
.....
.....

3- Pourquoi avez-vous choisi Accent Français ?

.....
.....
.....

CONTACT

Accent Français 2 rue de Verdun 34000 Montpellier - France
Tel : 33 (0) 467 58 12 68 - Fax : 33 (0) 434 22 11 64

CONTACT INTERNET

info@accentfrancais.com
www.accentfrancais.com

ACCENT FRANÇAIS - enseignement supérieur privé - Siret N° 423 636 851 00010