

Provence en Famille

French Immersion Homestay Programs

ENROLLMENT FORM

First name: _____

Last name: _____

Date of Birth (optional): _____

Occupation: _____

Address: _____

Nationality: _____

Tel: _____

Fax: _____

e-mail: _____

How did you hear about Provence en Famille? _____

COURSES

Please check which course you would like to attend and in which language:

- French Language Homestay Program
 - 10 hours of instruction per week
 - 15 hours of instruction per week
 - 20 hours of instruction per week

- French Culture Homestay Program
 - in French
 - in English

- French Cooking Homestay Program
 - in French
 - in English

Number of weeks _____ Start date (Sunday): _____ End date (Saturday) _____

Number of people enrolling for this time period:

- one
- two Name of the second person _____ relationship _____
 - We would like to share one bedroom.
 - We would like two bedrooms.

Please state your approximate level of French:

- Elementary
- Intermediate
- Advanced

How many years have you been studying French/English? _____

Reason for studying French:

- Pleasure/Travel
- Professional
- Exam

TRANSFERS (Please check one)

- I would like a transfer to and from the Marseille airport. (no extra charge)
- I would like a transfer to and from the Marseille train station. (no extra charge)
- I will be coming by car.
- I do not yet know my travel plans but will send that information when it is known.

Allergies: _____

- smoker
- non-smoker

Interests: _____

DECLARATION

I confirm that the information I have given is true and I have enclosed a deposit of **20% of my total Homestay Program cost** to confirm my enrollment.

Signature..... Date.....

Please send your completed form to the address below together with your deposit.

HOW TO PAY

A deposit of **20% of the total Homestay Program cost** is payable at the time of booking. The balance is due and must be received at least two weeks before the start of the course. Payments can be made in one of the following ways (please check the box of the method of payment you are using):

- A foreign draft in euros, drawn on a French bank, made payable to Elisabeth Dol, and sent to the address below. A check for the deposit is enclosed.
- Bank transfer- Banking information will be sent to you upon receiving your enrollment form.

Elisabeth Dol

25, Allée de la Calanque
13620 Carry-le-Rouet
France

Tel: +33 (0)4 42 44 70 77

from the USA: 011 33 4 42 44 70 77

Fax (Please notify us before sending.): +33 (0)4 42 44 70 77

from the USA: 011 33 4 42 44 70 77

e-mail: e.dol@provence-en-famille.com