

REGISTRATION FORM - 2019/2020

Member N° :

Please fill in CAPITAL LETTERS

Mr. Ms. Family Name.....

First NameDate of birth ____ / ____ / ____

Address

ZIP code.....CityNationality

Mobile numberHome number

E-Mail

Chosen course(s)				RATE (see program)	
CODE	SUBJECT	DAY	SCHEDULE	Course rate (Boulogne)	Course rate (Other cities)
9-				€	€
9-				€	€
9-				€	€
MEMBERSHIP				50 €	60 €
TOTAL				€	€

Registration requirements:

- I cannot, attend a course in which I am not enrolled under any circumstances.
- To change courses, I must apply in advance to the Association's office and not to the teacher.
- The Association Philotechnique reserves the right to cancel or postpone any course of which staff is inadequate.
- **In any case, fees and tuition cannot be refunded - except courses cancelled by the Association.**
- The enrollment is strictly personal. It is not accessible to anybody else.

I declare that I have read and accepted the above registration conditions.

I refuse that the Association Philotechnique use any photograph of myself, taken within a group in the context of the activities of the Association - tick the box → ☐

Date: ____ / ____ / ____

Signature with the words "read and approved »

How did you hear about us?

Ne rien inscrire (à compléter par nos services) :

Pièce d'identité : CNI ☐ Permis de conduire ☐ Carte de Séjour ☐ Passeport ☐ Autre

Justificatif de Domicile ☐ ou de l'Employeur ☐ Préciser :

Carte Bleue ☐ Espèces ☐ Chèque ☐ Précisez la Banque..... Chèques différés (nombre).....