## 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?	
<b>COURSES</b> Please check which course you would like to attend and in which language	<b>:</b> :
☐ French Language Homestay Program: ☐ full board ☐ half I ☐ 10 hours of instruction per week ☐ 15 hours of instruction per week ☐ 20 hours of instruction per week	board
☐ French Culture Homestay Program: ☐ full board ☐ half I ☐ in French ☐ in English	board
<ul><li>□ French Cooking Homestay Program</li><li>□ in French</li><li>□ in English</li></ul>	
Number of weeks Start date (Sunday): End date (S	aturday
Number of people enrolling for this time period:	
☐ one ☐ two Name of the second person rela	ationshii

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