SOCIETÀ DANTE ALIGHIERI

"il mondo in italiano"

"for the diffusion of Italian language and culture"

Language School Enrolment form & Membership Application form

2020 *Term 4*

(Please print clearly)

Title, name, surname Mr. Mrs. Ms. Miss ______________________________

Address ______________________________

______________________________ postcode ______________

E-mail ______________________________

Contact (phone) ______________________ Occupation ______________________

	Monday *possible classes*	Tuesday *possible classes*	Wednesday *possible classes*	Thursday *possible classes*	Friday *possible classes*
Morning classes start at 9:45am	☐ L **1**		☐ **C** e **S**	☐ L 2 ☐ L 3 ☐ **C** e **S online**	☐ **C** e **S 1** ☐ **C** e **S**
Evening classes start at 6:30pm	☐ L **1 online** ☐ L **5 online**	☐ L **2**	☐ **Preparatorio online** ☐ Elementare **online**	☐ L 1 **online** ☐ L 3 **online**	

Please **write 1** for your preferred day/time your course/level, **write 2** for a second preference in case of unavailability

Duration	Cost	Select	Membership (Annual fee)	Cost	Select	Renewal?
Term 4 – 10 weeks	$250.00		Single	$ 40.00		
			Family	$ 65.00		Yes / New
			Concession	$ 25.00		
			Life	$ 600.00		

No further discounts apply

Total ____________

New members only:
Signed: **Date:**

How did you hear about the Dante Alighieri School? Friends Web site Advertisement Flyer

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Payment Please debit my credit card for the amount of: $ ______________
Bankcard Mastercard Visa card

Number ☐☐☐☐-☐☐☐☐-☐☐☐☐-☐☐☐☐

Expiry date _________(mm) /________(yy) (4 digits)

Name of cardholder ______________________________

Alternative payment:
cash / eftpos
cheque / money order

Bank Acc: **Dante Alighieri Society Inc**
BSB: **064-000**
Account No: **902803**

Office Use Only
Date Received: ______________
Nominated by: ______________
Date: ______________

DAS student
Yes / No / Giochimpara

Date accepted by executive: ______________________

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