



Enrolment Form 2012

Private Italian Lessons

Title: _____
Name: _____
Surname: _____
Date of birth: _____
Address: _____

Day Contact No: _____
Fax: _____
E-mail: _____

Why are you interested in Private lessons?

Is there an aspect of the Italian Language and/or culture that you are seeking to improve?

How did you hear about our course?

- | | |
|--|---|
| <input type="checkbox"/> Word of Mouth | <input type="checkbox"/> Co.As.It. Website |
| <input type="checkbox"/> Co.As.It. Newsletter | <input type="checkbox"/> Personalised Letter/Brochure |
| <input type="checkbox"/> Event (specify) _____ | <input type="checkbox"/> Other (specify) _____ |

My level of Italian is (please complete our self-assessment on our website before answering):

- | | | |
|-----------------------------------|-----------------------------------|-----------------------------------|
| Level A1 <input type="checkbox"/> | Level B1 <input type="checkbox"/> | Level C1 <input type="checkbox"/> |
| Level A2 <input type="checkbox"/> | Level B2 <input type="checkbox"/> | Level C2 <input type="checkbox"/> |

Are you currently a language student? Please indicate an answer.

- No
 Yes – Year level _____
 University student
 Co.As.It. Italian Classes for Adults
 Other education institute – please specify: _____

I am available to attend my lesson/s on (please indicate 4 options in order of preference from 1 to 4):

<input type="checkbox"/> Monday	<input type="checkbox"/> am	<input type="checkbox"/> pm	From _____	To _____
<input type="checkbox"/> Tuesday	<input type="checkbox"/> am	<input type="checkbox"/> pm	From _____	To _____
<input type="checkbox"/> Wednesday	<input type="checkbox"/> am	<input type="checkbox"/> pm	From _____	To _____
<input type="checkbox"/> Thursday	<input type="checkbox"/> am	<input type="checkbox"/> pm	From _____	To _____
<input type="checkbox"/> Friday	<input type="checkbox"/> am	<input type="checkbox"/> pm	From _____	To _____
<input type="checkbox"/> Saturday	<input type="checkbox"/> am	<input type="checkbox"/> pm	From _____	To _____

Co.As.It. will endeavour to meet your preferred option but cannot guarantee that this will be met as all bookings are subject to the availability of teachers and the Co.As.It. premises.

I would like to purchase:

Individual Packages

- 3 'one hour lesson' voucher for \$210
- 5 'one hour lesson' voucher for \$330 (\$20 discount)

Partnered Packages

- 3 'one hour lesson' voucher for \$270
- 5 'one hour lesson' voucher for \$430 (\$20 discount)

Pay by: Cash Cheque Money Order

 MasterCard Visa

Card No: _____
Expiry Date: _____
Cardholder's Name: _____
Signature: _____

I understand that to organize private lessons I must liaise solely with Co.As.It. Program Coordinator, responsible for these classes.

Signature: _____

Send enrolment form with payment to:

Co.As.It.
Ph: 9564 0744
Fax: 9569 6648
Norton Business Centre,
PO Box 342
Leichhardt NSW 2040