



## REGISTRATION FORM WINTER COURSE 2020

Last Name:.....

First Name(s): .....

Date of birth:..... Place of birth: .....

Nationality:..... Mother tongue:.....

E-mail:..... Sex:  Female  Male

### Choice of programme

Option 1:  Mini High School Programme

Option 2:  Swiss Discovery Programme

### Length of programme

Number of weeks :  4½ weeks (not including excursion week; not including ski week)

Number of weeks :  5½ weeks (including excursion week; not including ski week)

Number of weeks :  6 ½ weeks (including excursion week; including ski week)

Arrival date:..... Departure date: .....

My son / daughter has studied French for ..... year(s) for ..... hours per week and has reached the following level:

Beginner  Intermediate  Advanced  Mother tongue

Please give details of any official examinations taken (DELFI, Alliance Française etc...)

### Father

Last Name:.....

First Name(s): .....

Private address:.....

.....

.....

.....

### Private details

Tel:.....

Fax.....

E-mail: .....

### Professional details

Tel:.....

Fax:.....

### Mother

Last Name: .....

Maiden Name: .....

First Name(s): .....

Private address (if different):.....

.....

.....

### Private details

Tel.: .....

Fax: .....

E-mail: .....

### Professional details

Tel: .....

Fax: .....

E-mail:.....

E-mail:.....

Profession:.....

Profession:.....

Marital status:  Married

Separated

Divorced

Other

Holder of parental authority:  Both

Mother

Father

Other:.....

**Other information**

I know Brillantmont through  Friend

Former student

Other school

Internet

Advert

Education adviser

Other:.....

Issuing country of passport:.....

Passport No.:.....

Expiry date: .....

Preferred weekly pocket money (for boarding students): CHF.....

**In an emergency**

*Coordinates of a person to be contacted in an emergency if it is impossible for us to contact the parents.*

Last Name:.....

First Name:.....

**Private details**

Tel:.....

Fax: .....

E-mail:.....

Relation to student: .....

**Payment of school fees**

Name and address of the person / company responsible for payment of school fees:

.....  
.....  
.....

*I confirm that I have read and that I accept the school's financial conditions.*

Signature of parents or responsible person:.....

Date: .....

*Brillantmont reserves the right to use images of students in official school publications (prospectus, website etc.) for marketing and promotional purposes. If you do not wish for images of your child to be used, please notify the school in writing.*