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ENROLLMENT FORM

Please fill the form out, and email it to us.

PERSONAL INFORMATION

Family name: _____

First name: _____

Age _____

Address _____

Nationality _____ Sex _____ Marital status _____

Telephone (with codes) _____

Cell _____ email _____

Occupation _____

Hobbies and interests

Do you smoke? Yes No

Special diet? _____

Allergies or special medication: _____

How did you hear about *Live Spanish*?

COURSE INFORMATION

What are your main expectations of the course?

How many hours per week do you wish to study? 15 20 25

Which program do you prefer? ONE-ON-ONE PARTNERS OPTION

My level is: Elementary Lower Intermediate Intermediate Upper Intermediate
Advanced

DATES OF STAY

(Sunday through Saturday). Please give 3 choices of dates, if possible, in order of preference:

1. Arrival: _____ Departure: _____

2. Arrival: _____ Departure: _____

3. Arrival: _____ Departure: _____

I will require airport transfer on:

Arrival: _____ Departure: _____

DECLARATION

1. I agree to pay the 100 € registration fee with this application and the remaining fees either by bank transfer prior to my arrival or in cash upon my arrival to Spain.
2. Fees will be paid in Euros.
3. I understand that no money can be refunded for any reason.
4. I accept the prices and conditions on this form.
5. I affirm that I am not suffering from any infectious illnesses.

Full name: _____

Date: _____

Additional comments, special needs:

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