

## **Registration for Intensive Course German**

## Mark with a cross please:

#### Autumn 2023 October 9 - December 15, 2023 1

#### Winter 2024 January 8 - March 15, 2024 1

#### Spring 2024 April 8 - June 14, 2024 1

#### Summer 2024 July 8 - August 16, 2024 2

*1 10 weeks / 200 lessons / 20 lessons per week / Monday – Friday, from 8:40 to 12:10*

*2 6 weeks / 150 lessons / 25 lessons per week / Monday – Friday, from 8:20 to 12:35*

## Mark with a cross please: Mr Ms

Name: .........................................................................................................................……..........

First name: .........................................................................................................................……..........

Date of birth: .........................................................................................................................……..........

Nationality: .........................................................................................................................……..........

Address: .........................................................................................................................……..........

 .........................................................................................................................……..........

Phone number: .........................................................................................................................……..........

E-Mail : .........................................................................................................................……..........

Your previous knowledge of German – Which level have you already completed? ……………………………

 .........................................................................................................................……..........

 .........................................................................................................................……..........

Date *:* .......................................................... Your signature: ..........................................................................

*(Upon signing the registration form, I hereby confirm that I have read and accept the general terms and conditions –* [www.delif.ch/agb.pdf](http://www.delif.ch/agb.pdf)*)*

by post: DeLiF, Rue de Rome 9, CH-1700 Fribourg by e-mail: info@delif.ch