Private Class Registration

Name: ____________________________
Child(ren)’s name (if applicable): ____________________________
Address: ____________________________ City: __________ ZIP: __________
Best phone # to reach you: __________ Alternate contact: __________
Email address: ____________________________

What level are you?
__ Complete Beginner A1  __ False Beg.1  __ Upper Beginner A2  __ Intermediate B1
__ Upper Intermediate B2  __ Advanced C1  __ Master C2

Have you studied French before?
__ No
__ Yes  __ 1-2 yrs ago  __ 2-5 yrs ago  __ 6-10 yrs ago  __ More than 10 yrs ago

What are your reasons for taking private lessons?
__ Travel/Recreation  __ Business  __ Personal  __ Other: __________

What are your goals?
__ Conversation  __ Grammar  __ Writing  __ Other: __________

Where would you like the classes to meet?
__ Main AF Denver location  __ Boulder  __ Centennial  __ Online  __ Other: __________

How often would you like to meet?
__ 1 time per week  __ 2-3 times per week  __ Other: __________

How long would you like your class sessions to be?
__ 1 hour each lesson  __ 1½ hours each lesson  __ 2 or more hours each lesson

What days of the week would you like to meet? (Number in order of preference 1-3)
__ Mon.  __ Tues.  __ Wed.  __ Thurs.  __ Fri.  __ Sat

What time of day would you like to meet? (The more specific the better.)
__ Morning  __ Afternoon  __ Evening  __ Flexible

How many hours would you like to purchase? __________ Membership? __________
Total $ (for private classes and membership (if applicable) __________

I have read the Alliance Française private class policies and agree to abide by them.

Date: __________ Signature: ____________________________

Private classes must be paid for in advance. Please contact the Alliance after you have scheduled classes with your teacher.

1 False Beginner is a Beginner A1 student that took French in the past but retains some grammar and vocabulary.