



# Alliance Française de Sacramento

## Spring Classes 2009

March 30 to June 12

1721 25th St., Sacramento, CA 95816

(25th and R Streets)

Tel: (916) 453-1723

e-mail: [af@afdesacramento.org](mailto:af@afdesacramento.org)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ E-mail \_\_\_\_\_

I wish to enroll in: \_\_\_\_\_  
Course \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_ Teacher \_\_\_\_\_

And also in: \_\_\_\_\_  
Course \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_ Teacher \_\_\_\_\_

I am enclosing payment as follows:

Tuition: \$ \_\_\_\_\_ Membership: \$ \_\_\_\_\_ Book: \$ \_\_\_\_\_ Total: \$ \_\_\_\_\_

Check one: I am a current AF member ☐ I have included payment to join the AF ☐  
I am renewing my AF membership ☐

Please clip and mail this form, along with a check payable to "Alliance Française de Sacramento," to:  
Spring 2009 Session, Alliance Française, 1721 25th St., Sacramento, CA 95816.

See you in class!

For office use:

Date: \_\_\_\_\_ Amount received: \_\_\_\_\_ Entered in db ☐ Entered in ab ☐ Card sent ☐ Conf. sent ☐