

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—Total: \$ \_\_\_\_\_ (Tuition: \$ \_\_\_\_\_) (Membership: \$ \_\_\_\_\_) (Book: \$ \_\_\_\_\_)

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 check payable to "Alliance Française de Sacramento," to:  
Summer 2008 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 ☐

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Classes  
2008

July 7 to August 30

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



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