

# *Tel.: 211 253467 or +260950934640*

# *Email:* [*info@alliancefr.co.zm*](mailto:info@alliancefr.co.zm)

# 

# FICHE D’INSCRIPTION — REGISTRATION FORM

# COURS D’ANGLAIS ET LANGUES LOCALES

# ENGLISH, NYANJA, BEMBA COURSES FOR ADULTS 2024

**SESSION 1**

**05th February to 15th April**

**•Nom / Prénom**

Surname / First Name:

**•Date de naissance**(jj/mm/aaaa)

Date of birth (dd/mm/yyyy):

**•Téléphone / E-mail**

Phone and Email (*print clearly*):

**•Profession**

Job:

|  |  |  |
| --- | --- | --- |
| **Cours de bemba - Bemba classes (10 hours) Fees** | | |
| **Lundi – Monday 18h – 19h** | **Level**  **Bemba (A1)** | **K 550** |

**Kindly note that:**

**•**Management reserves the right to cancel a class 2 weeks after the beginning of the session if the minimum sustainable number of students is not   
reached. In this case, the student can either transfer to another class of the same level or be refunded if no solution can be found.

•Under any other circumstances, fees are neither refundable nor transferrable to the next session.

## I acknowledge the above terms and conditions. Lusaka,      /      2024 Signature:

**Deadline for Registration: two weeks after the beginning of the session**

|  |
| --- |
| **FOR ADMINISTRATION ONLY**  Tuition fees:       Receipt number:       Type of payment: Cash Cheque POS  EFT |