Scuola Leonardo da Vinci. - Florence - Milan - Rome - Siena

Application Mrs. Ms.	Mr.					
First name:		Family name:				
Date and place of birth:			Nation	ality:		
Profession/Studies:		Passport number:	•			
Home address:						
City:		Postal code:		Country:		
Phone: /	Cellular: /	I	Fax:	/		
Email:						
In case of emergency please inform:						
I wish to enroll at the Scuola Leona	ardo da Vinci in:	□ Florence) Milar	ם ר	Rome [Siena
I found out about the Scuola Leona		ugh:				
I wish to enroll in the followi	ing courses:	C.		_		Tatal
Course No. Course Title		St	arting date	e 		Total weeks
		da da da		month month month	year year year	
		da	ay r	month	year	
I wish to enroll in the following additional o	courses:					
Special requests/observations:						
My knowledge of Italian:						
	🗋 no 🗖 yes:					
University/school:						
Address:						
Zip code: City:						
Name of Italian teacher:						
Self evaluation (A1/A2 = Ability levels account	rding to the assessment s	cale of the European Lar	nguage P	ortfolio):		
□ absolute beginner □ beginner wit □ high intermediate (B1) □ advanced (B	th previous study of Italia 2)	n Dasic (A1) Description low intermediate (A2) Description (C1) Description diploma level (C2)				
				Please fill	in also the s	econd page!
Please do not fill in! No	Da	Ag	Os]		

First name:		Family name:	
I wish the school	to provide for my acco	mmodation:	
 Family, breakfast A Family, half board Ex 	partment I Hotel, xtra Comfort Apartment I no ac reque		
Do you smoke?		eu	
Do you have any allergies?	🗅 no 📋 yes: Please give detai		
Do you need a special diet?	🗅 no 📋 yes: Please give detai		
Do you need transfer?	🗅 no 📋 yes: Please give detai		
	Arrival date:	Arrival time:	
	Arrival location:		
		Train number:	
Special requests/observation	ons:		
N.B.: For all accommodati	ons: We need your credit card nu	ber as guarantee deposit to make reservations.	

Euro by means of the following Card:

Payment: Note that if you are registering more than 21 days before the beginning of the course, we require the payment of the registration fee of 70 Euro. If you prefer, you can also pay the total course fees at once. If you are registering less than 21 days before the beginning of the course, we require the payment for the total course fees.

Payment by Bank, Post, Cheque:

I have already paid the amount of:	Euro	by means of:
5.		,

International Banker's Cheque	International Post Money Order	🗖 via Bank (incl. transfer costs)
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Payment by Credit Card: Payment of courses: Please charge the amount of: ____ Deposit for accommodation: □ Please take a guarantee deposit for accommodation reservations by means of the following Card:

	 Eurocard/Master Card/Access Diner's Club 	 American Express JCB 	Visa/Bankamericard				
	Credit Card number		Card Security Code	valid through			
Card holder's name (mandatory):							
Card holder's signature:							
I have read the "General Conditions of Participation" and hereby declare my acceptance:							
Place and date:							

Signature (or by legal guardian):

Enclosed: Banker's Cheque or receipt of payment

Please send the application form directly to the school centre of your choice. Thank you!

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