

INSCRIPTION AUX EPREUVES DU DELF / DALF



**Please return to:
Alliance Française de Pasadena
34 E. Union St.
Pasadena, CA 91103**

DIPLÔME PRESENTE / REGISTRATION FOR (PLEASE CIRCLE)	A1 <input type="checkbox"/> A2 <input type="checkbox"/> B1 <input type="checkbox"/> B2 <input type="checkbox"/> C1 Lettres et sciences humaines <input type="checkbox"/> Sciences <input type="checkbox"/> C2 Lettres et sciences humaines <input type="checkbox"/> Sciences <input type="checkbox"/>
DATE D'EXAMEN / EXAM DATE	.....
NOM / LAST NAME	.....
PRENOM / FIRST NAME	.....
DATE DE NAISSANCE / D.O.B.	.....
PAYS DE NAISSANCE / COUNTRY OF BIRTH	.....
VILLE DE NAISSANCE / CITY OF BIRTH	.....
NATIONALITE / NATIONALITY	.....
NOM DU PERE / FATHER'S NAME	.....
ADRESSE / ADDRESS	..... ..... .....
TELEPHONE	.....
MEL / E-MAIL	.....
SIGNATURE	.....
PAYMENT: MC <input type="checkbox"/> VISA <input type="checkbox"/> # _____ EXP. DATE: _____	MONTANT: Security Code: _____
Note : Exam fee is not refundable once registered.	