

French as a Second Language (FLS)

Name		
Last Name*	First Name*	Middle Name
Address		
Street No.*	Street Name*	
City*	Province*	Postal Code*
Contact information		
Phone*	Alternate phone	Email*
Emergency contact		
(First and Last name)		
Phone	Relation	
Course information (to be filled out by instructor)		
Course Name Beginner Level		
Start date	Time	End date
Cost	Payment received <input type="checkbox"/> cheque <input type="checkbox"/> e-transfer Initial_____	

Registration: please send to dg@novocentre.com.

Payments

Payments of (250\$) can be made by e-transfer to dg@novocentre.com. Please ensure that the answer to the secret question is “novocentre”

Withdrawal and Refund Policy

A \$20.00 administrative fee will be charged on all withdrawals.

Your request must be submitted in writing by email to dg@novocentre.com before the second scheduled class.