

LE PETIT CANARD

Your friendly French experience



APPLICATION FORM FOR COURSES

LPC7, LPC8, LPC11, LPC12, LPC14, LPC15,
LPC16, LPC17

Title: _____ Surname: _____

First name: _____

Full address (including code): _____

Phone (day): _____

e-mail: _____

Phone (evening): _____

Please tick the course to which this application refers:

- | | | |
|--|--------------------------|-------------------------|
| LPC.7: "Paddle Faster" 30-31 May 2005 | <input type="checkbox"/> | Maximum 12 participants |
| LPC.8: "Take the plunge" 1-2 June 2005 | <input type="checkbox"/> | Maximum 12 participants |
| LPC.11: "Paddle Faster" 24-25 October 2005 | <input type="checkbox"/> | Maximum 12 participants |
| LPC.12: "Take the Plunge" 26-27 October 2005 | <input type="checkbox"/> | Maximum 12 participants |
| LPC.14: "Paddle Faster" 3-4 April 2006 | <input type="checkbox"/> | Maximum 12 participants |
| LPC.15: "Take the Plunge" 5-6 April 2006 | <input type="checkbox"/> | Maximum 12 participants |
| LPC.16: "Paddle Faster" 30-31 May 2006 | <input type="checkbox"/> | Maximum 12 participants |
| LPC.17: "Take the Plunge" 1-2 June 2006 | <input type="checkbox"/> | Maximum 12 participants |

Signed: _____

Date: _____

Payment details:

A non-refundable deposit of 30 euros must accompany this application. The balance of 135 euros should be paid 15 days before the course takes place.

Cheques should be sent to:
DAVID BUCKLAND
"LE PETIT CANARD"
40 HILLSIDE CRESCENT
ENFIELD
EN2 0HR
ANGLETERRE

Please make cheques payable to:
DAVID BUCKLAND

I agree to Le Petit Canard holding my details for mailings regarding future courses. My details will not be given to any other company or organisation.