

Solea Spanish School 7 S.L C./. Eugenia Viñes, 115 | 46011 | Valencia | España www.soleaspanishschool.com info@soleaspanishschool.com

## **REGISTRATION FORM**

Name	Surname		S	ex
Adress				
Town	Post Code		Country	
Telephone Number		e-mail adress		
Date of birth Month Day Year		Nationali	ty	
Profession		Passport numbe	er	
How did you find us?				
What level of Spanish do you think you have BEFORE studying in Soleã Spnish School?				
A1 (Beginners)	B1 (Intermediate)	C1 (Su	perior)	
A2 (Basics)	B2 (Advanced)	C2 (Pro	oficiency)	
COURSE				
I wish to register in the:				
Intensive Course C	One to one Course	DELE Cou	urse	Group Course
From / / to	/ /	Price of course	€ +35€	E Registration fee
Month Day Year iv	ontri Day Year			
PAYMENT				
I will make the payment of 100€ as advanced payment of the total price of the course by Bank Transfer to Soleã Spanish School 7 S.L.				
IBAN: ES23 3159 0072 8226 4204 4024 BIC/SWIFT CODE: BCOEESMM159				
I wish to pay for the rest of the course:				
By bank transfer to the acco	ount mentioned abov		edit Card syments in the school)	
Date / /	Signature		(of parents or guardi	an in case of under 18
Month Day Year				

In compliance with the provisions of article 5 of the Organic Law 15/1999, of December 13, Protection of Personal Data (LOPD), they are informed that the personal data provide to us will be stored in a file that is from Soleā Spanish School 7, SL. Yo can exercise your right access, rectification, cancellation and opposition to the processing of such data, in the terms established in the LOPD, at C/. Eugenia Viñes, 115 | Valencia | España