

Accès Cinéma Africain — African Film Access

Penobscot School in Montréal at Vues d'Afrique

French language immersion in the context of Francophone-African cinema and video

Penobscot School
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Rockland, Maine 04841 USA
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REGISTRATION FORM - ADULTS

Your name _____ Sex: M ___ F ___

Mailing address: (street, PO Box) _____

(city) _____ (state/province) _____ (zip) _____

Tel no: (day) _____ (evening) _____

Email: _____

Profession _____ DOB: _____

Why have you chosen this program? (e.g., personal interest, job, academic studies)

Where have you studied French? For how long?

Other information related to your language learning background (e.g., trips to a country where French is spoken, family history, etc.)

Do you have a special interest or hobby in French or African Studies? Please explain.

What is your approximate level in French? What are your strong and weak

points in grammar, listening comprehension, speaking, writing and reading ability?

How did you hear about this program? Internet___ newspaper___
web site ___ poster___ from your teacher___ from a friend___ on
Penobscot School mailing list___ conference/meeting___
other_____

REGISTRATION deadline: April 1

French language immersion 2010 rate of \$ 210 US for adults includes:

- Orientation on Thursday evening, April 22 (location to be announced)
- Tickets to all films
- French classes/discussions Friday, Saturday and Sunday mornings
- Meetings and discussions with filmmakers Friday, Saturday, and Sunday mornings
- All French course, festival and city orientation materials
- 3.0 C.E.U. for Teachers

Transportation, meals, and lodging are not included. Please contact us for recommended hotels and hostels in a range of prices.

Please enclose your check in U.S. funds, made out to Penobscot School, and mail it to:

Accès Cinéma Africain, Penobscot School, 28 Gay Street, Rockland, ME 04841 USA. Your payment is refundable, minus \$20, until April 5. If the course is canceled for any reason including under-enrollment, registered participants will receive a total refund of their payment.

Teachers: ___ check here if you wish to apply for continuing education credits, and include a \$10 processing fee.

Payments may be made by personal check, Visa or Mastercard.
Please note that we cannot reserve your place until your payment is received.

___ Visa ___ Mastercard # _____ exp. date _____

Name on card: _____ Amount: _____

Signature _____