



Società Dante Alighieri

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APPLICATION FORM – MODULO D'ISCRIZIONE Winter 2011

COURSE/CORSO: Tick choice	FORM 1 (Tuesday)	FORM 2/3 (Tuesday)	'O' LEVEL (Thursday) Form 4/5
Name/Nome			
Surname/Cognome			
Address/Indirizzo			
Tel:		Mobile/Cellulare:	
E-mail:			
E-mail: (parents/genitori)			
Date of Birth/Data di nascita:		Any additional information:	
School/ Scuola			
OTHER COURSES IN ITALIAN/Altri corsi di lingua italiana			
<p>Once the courses have started no refunds, for whatever reason, can be effected. Nessun rimborso è previsto per l'interruzione dei corsi dopo il loro inizio, per nessun motivo.</p> <p>Send by post to above address, or visit our offices (for opening hours please check on home page), to effect payment. Cheques are to be made payable to Società Dante Alighieri.</p> <p>FEES: In advance with application form. Amount As indicated in the course pages or over the phone.</p> <p>DATA PROTECTION STATEMENT: The personal data submitted above will be subject to the Data Protection Act 2001 (Chapter 440 of the Laws of Malta). The SDA will retain this data for the compilation of a database for internal use. Data subjects listed in this database will be informed of any future courses.</p> <p>DECLARATION: Details of the Data Protection Statement have been read to me/ I have read the Data Protection Statement and I consent to the information provided in this application being disclosed as described therein.</p> <p>I declare that the information I have given on this form is accurate and complete.</p> <p>Parent's Signature</p> <p style="text-align: right;">Date _____</p>			