



Alliance Française
de Seattle

Experience the French in you!

Inscriptions aux épreuves du DELF/DALF

Please complete all sections of the Registration form. You can then mail the form and appropriate payment to the address listed below, email it to director@afseattle.org or fax it to (206) 632-9040.

Alliance Française de Seattle
Good Shepherd Center
4649 Sunnyside Ave. North, Ste. 205
Seattle, WA 98103

We recommend printing a copy of this form for your records.

Exam fee is not refundable once registered.

EXAMINEE INFORMATION			
Name	(Dr. Mr. Mrs. Ms.)		
	PRINT name above – First Name – MI – Last Name		
D.O.B /.... /....	Country of Birth	City of Birth
Nationality		Father's Name	
Address			
City		State	ZIP
Home Phone		Business Phone	
Email Address *			
Are you a member of Alliance Française de Seattle?		YES <input type="checkbox"/>	NO <input type="checkbox"/> NEW <input type="checkbox"/>
Do you need to renew your membership?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
How did you hear about the Alliance Française de Seattle?			
<input type="checkbox"/> Friend		<input type="checkbox"/> Internet	<input type="checkbox"/> Print Ad
<input type="checkbox"/> Other _____		<input type="checkbox"/> Radio Ad	

* Email is used for reminders, announcements and to send the monthly E-news. *

REGISTER FOR / EXAM DATE	
Exam	<input type="checkbox"/> A1 <input type="checkbox"/> A2 <input type="checkbox"/> B1 <input type="checkbox"/> B2 <input type="checkbox"/> C1 <input type="checkbox"/> C2
Exam Date	(MM/DD/YY) /.... /



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PAYMENT INFORMATION	
◆ Check # _____	
<input type="checkbox"/> I have enclosed my check for \$ _____ payable to Alliance Française de Seattle	
◆ Credit Card	
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard	
Card Number	Expires on (MM/YY)
CVV	The CVV (Credit Card Verification Value) is required as a security measure to reduce the risk of fraud. MasterCard or Visa: 3-digit CVV is on the back of your card at the end of the account number. American Express: 4-digit CVV is on the front of the card above the account number.
Payment Checklist	
	Registration \$
	Membership \$
	TOTAL \$

I have read and accept the Alliance Française de Seattle Cultural & Language Center Policies.

Date _____ **Signature (required)** _____

Un grand merci et à très bientôt!



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DEL F/ DAL F – PRICE LIST & DURATION		
EXAM	AF Seattle Members	Nonmembers
A1 Written: 1hr 20min. Oral Exam: prep. 10 min, interview 7 min.	\$90	\$110
A2 Written: 1hr 40min. Oral Exam: prep. 10 min, interview 8 min.	\$90	\$110
B1 Written: 1hr 45min. Oral Exam: prep. 10 min, interview 15 min.	\$110	\$130
B2 Written: 2hr 30min. Oral Exam: prep. 30 min, interview 20 min.	\$130	\$150
C1 Written: 4hr Oral Exam: prep. 1h, interview 30min.	\$170	\$190
C2 Written: 3hr 30min. Oral Exam: prep. 1h30 min, interview 30 min.	\$170	\$190