



The International Film School of Paris SUMMER WORKSHOPS 2010

REGISTRATION FORM

Please, send to :

EICAR, Applications Office

Parc des portes de Paris
50 avenue du Président Wilson, bât. 136
BP 131 - 93214 La Plaine Saint-Denis

I, undersigned, hereby apply to the following summer workshop(s):

Workshop(s)	Dates	Fee in €
Total fee :		

■ PERSONAL INFORMATION

Mr/Mrs/Ms Name: _____ Surname: _____

Address: _____

Postal Code: _____ City: _____ Country: _____

Tel. N°, Home: _____ Mobile: _____

E-mail: _____

Date of Birth: _____ Citizenship: _____

EMERGENCY CONTACT:

Name: _____ Relationship: _____

Tel. N°: _____ E-mail: _____

How did you learn about our workshops? _____

■ TERMS AND CONDITIONS

REGISTRATION : Applications are handled on a "first come first served" basis. The School confirms the registration on receipt of this form duly completed and of the first instalment. Registration is subject to the fact that the workshop is not fully booked. Applicants may be placed on a waiting list. The school may cancel registrations one month prior to the beginning of a workshop, if a minimum number of attendants is not secured. All instalments will be refunded.

PAYMENTS : A first non refundable instalment of 150 Euros is due on registration. The full fee is due 7 days prior to the start of the workshop. Failing this, the registration is cancelled.

Fees are payable by cheque made out to 'EICAR', in Euros, or by Bank transfer onto the following account:
IBAN: FR76 3006 6108 6000 0102 5650 189 BIC: CMCIFRPP Domiciliation: CIC IVRY

Signed: _____ On: _____ 2010, In _____