

Journée Intensive en Français
le 20 février 2010
American Association of Teachers of French
Feuille d'inscription (Registration Form)

Participant's name _____

Participant's French name _____

Address _____

Town and zip code _____

Home phone _____ Cell phone _____

Email address _____

If a student, French teacher's name _____

School, address, town, zip code _____

Student's level of French: French 2 _____ French 3 _____ French 4 _____ French 5 _____

Check here if you were on the waiting list last year, and were not able to attend.
Your French teacher must initial here. _____

Total number of years you have studied French _____

Student's age _____ Food allergies _____

Lunch: Please check off your choice of a sandwich.

Turkey _____ Ham _____ Roast beef _____ Chicken salad _____ Tuna salad _____ Vegetarian _____

Cost of the day: \$ 25 for each student and teacher. Students should give this form and a check payable to AATF/Chicago-Northern Illinois to their French teacher by December 7. Registrations should be mailed by December 11 to Pat Olderr, 1165 Wenonah, Oak Park II 60304. Personal checks are fine. There is a limit of 10 students per school to allow more schools to participate. Registrations will be limited to 60, after which students will be placed on a waiting list. Location: West Leyden High School, 1000 North Wolf Road, Northlake, IL

Language Pledge

- I promise to remain in French during the entire immersion day, from the time I arrive at 8 AM until we are released from this pledge at the end of the day at 4:00 PM.
- I know that I may not know how to say everything I would like, but I will talk around it.
- I know that I can always use sign language, a dictionary, or the French alphabet to indicate an English word that I need in French.
- I am attending this immersion day to practice my French and to acquire more knowledge of the language and the culture.

Signed _____

Date _____

Please read and sign the waiver that appears on the back of this form.

WAIVER: Please read this form carefully and be aware that in signing up for and participating in this program, you will be waiving and releasing all claims for injuries you might sustain arising out of this program.

As a participant in the program, I recognize and acknowledge that I assume the full risk of injuries, damages, or loss, which I may sustain as a result of participating in the activities associated with this program. I agree to waive and relinquish all claims I may have as a result of participating in the program against the American Association of Teachers of French, West Leyden High School, and their officers, agents, servants, and employees. I do hereby release and discharge the aforementioned from any and all claims from injuries, damage or loss, which I may have or which may accrue to me on account of my participation. I further agree to indemnify and hold harmless and defend the aforementioned from any and all claims resulting from injuries, damages, and losses sustained by me and arising out of, connected with, or in any way associated with the activities of the program. I and my parent(s), or legal guardian have read and fully understand the program details and waiver release of all claims.

I give / do not give permission for my child's photo to appear in the AATF publications.
(Circle one of the above.)

Parent's Signature _____ Date_____

Student's signature_____ Date_____

Your assigned group and sessions will be noted on the schedule you will be issued upon arrival at the immersion day.