



# ITALIAN SCHOOL NJ

## REGISTRATION FORM - YOUTH (2.5-hour classes)

### APPLICANT INFORMATION

Student name: \_\_\_\_\_  
(last) (first) (Middle)

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ School Grade \_\_\_\_\_  Male  Female

Home address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Main Contact e-mail: \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Telephone: \_\_\_\_\_

Allergies? Please list: \_\_\_\_\_

Siblings: 1. \_\_\_\_\_ Age: \_\_\_\_\_  
2. \_\_\_\_\_ Age: \_\_\_\_\_  
3. \_\_\_\_\_ Age: \_\_\_\_\_

Please check the student level of Italian:  Beginner  Intermediate  Advanced

Reason for your interest in the Italian language:

Family is from Italy  Personal interest  Imminent travel plans  Other

### FAMILY INFORMATION

Parent's/Guardian's name: \_\_\_\_\_  
(last) (first)

Address (if different from applicant): \_\_\_\_\_

Home phone number: \_\_\_\_\_ Cell-phone: \_\_\_\_\_

Parent's/Guardian's name (OPTIONAL) : \_\_\_\_\_  
(last) (first)

Address (if different from applicant): \_\_\_\_\_

Home phone number: \_\_\_\_\_ Cell-phone: \_\_\_\_\_

### SCHEDULE

Italian School NJ offers a Fall semester that starts the first week of October and ends in mid-or end of February, and a Spring semester that start right after the Fall semester and ends within the second week of June. Both semesters comprise 14 lessons 2.5- hour long each.

Which semester are you registering for (all that apply)?  Fall  Spring

Please indicate your class schedule preference (all that apply):

Cuccioli - all levels (Ages 2.5-3.5):  Saturday 10:15-12:45 PM  Saturday 12:15-2:45 PM

Coccinelle - Beginners and Intermediate (Ages 4-6):  Saturday 10:15-12:45 PM

Scoiattoli - Beginners and Intermediate (Ages 6-8; k-1<sup>st</sup>)  Saturday 10:15-12:45 PM

Farfalle - Beginners and Intermediate (Ages 8-10; 2<sup>nd</sup> -4<sup>th</sup>)  Saturday 10:15-12:45 PM

Fringuelli - Beginners and Intermediate (Ages 10-13; 5<sup>th</sup>-7<sup>th</sup>)  Saturday 10:15-12:45 PM

Giraffe - all levels (High School)  Saturday 10:15-12:45 PM

ALL BILINGUAL CHILDREN (LA SCUOLA DEL SABATO)  Saturday 12:15-2:45 PM

Please note that additional 2-hour classes are available for children at different times and days.

Please check our web site on the Schedule and Registration Forms page for complete listing.

If none of the scheduled classes are convenient, you may request an alternate time by using the "Request a class form" on our web-site. A class can start any time after we receive 4 applications for the same time and day.

It may be possible to join on-going classes based on space availability and teacher's approval.

Students' placement in classes rather than beginners may be based on the completion of an entrance test.



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Student name: \_\_\_\_\_  
(last) (first)

### TUITION

The cost of the course is \$780, which includes lessons, books and other material necessary for the class. If you are registering for a course that is already started the cost will be pro-rated.

Please note that we need a minimum of 4 students to start a class. Once we reach the minimum number of students necessary to start the class we will notify you. If we cannot accommodate you within 6 weeks from your request we will return your check promptly.

Italian School NJ offers 10% discount for a second family member registered or a second class and 15% for 3 or more family members registered.

**To reserve your spot please complete this application and return it with a deposit of \$200, which will be applied toward your total tuition.**

You will be notified by e-mail of your remaining balance, which should be submitted by the first class the student is planning to attend

All classes must be paid in full by the first class.

**Please send registration form and check to the following address: Italian School NJ, 401 Morris Avenue, Mountain Lakes NJ 07046.** Please make all checks payable to Italian School NJ. You will be notified by e-mail when we receive your registration.

### WAIVER

I release Italian School NJ from any and all liability and waive as against Italian School NJ all recourse, loss or damage, including any consequential damage or loss, claims, causes of action of any kind whatsoever arising from my participation in the class.

It is hereby understood and agreed that Italian School NJ shall not be responsible for any theft, damage or injuries incurred during classes or on location promises.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date



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Student name: \_\_\_\_\_  
(last) (first)

### QUESTIONNAIRE

This optional questionnaire helps us place the student in the appropriate class.  
If the registration is for a returning student, you may not complete this part.

Is the student familiar with the Italian Language ?  Yes  No If YES please check why:  
 Have taken Italian course/s before  Have studied Italian by him(her)-self  
 Familiarity with Italian by family members  One or both parents are native Italian  
 Other

If the student has taken Italian classes in the past please briefly describe when and for how long:\_\_\_\_

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If parents or other family members speak Italian to the students please describe briefly. Include to state the frequency that the student is exposed to the Italian language:\_\_\_\_\_

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Can the student read?

In English:  Yes  No In Italian:  Yes  No

Can the student write?

In English:  Yes  No In Italian:  Yes  No

Please check the following for the level of Italian:

Understanding:	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Spoken:	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Written:	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Use of grammar:	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced

Does the student know any other languages? If yes please list and briefly describe:\_\_\_\_\_

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