

REGISTRATION FORM 2026

FRENCH IN NORMANDY IH ROUEN

PLEASE EMAIL COMPLETED FORM TO INFO@FRENCHINNORMANDY.COM



International
House
Rouen



PERSONAL INFORMATION

FIRST NAME		LAST NAME	
GENDER MALE/FEMALE/OTHER		DATE OF BIRTH dd/mm/yyyy	
EMAIL (if under 18, provide parent's email address)			
ADDRESS		CITY	
		POSTAL CODE	
COUNTRY		NATIONALITY	
MOBILE		PROFESSION	
EMERGENCY CONTACT INFORMATION IS REQUIRED FOR ALL STUDENTS			
EMERGENCY CONTACT NAME + RELATIONSHIP (ie. mother/father)		EMERGENCY CONTACT PHONE NUMBER	

PLEASE INDICATE YOUR CURRENT LEVEL OF FRENCH (mark an X)

A1		A2		B1		B2		C1		C2	
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IF YOU HAVE ALREADY TAKEN AN EXAM, INDICATE WHICH EXAM AND WHEN.

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EXAM BOOKING: IF YOU WISH TO TAKE AN EXAM, PLEASE INDICATE WHICH EXAM AND LEVEL.

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COURSE SELECTION

COURSE	NUMBER OF WEEKS	PRICE PER WEEK	START DATE dd/mm/yyyy
INTENSIVE 25H/WEEK			
SEMI-INTENSIVE 15H/WEEK			
DEMI-INTENSIVE 10H/WEEK			
DEDICATED DELF DALF 25H/WEEK			
DEMI DELF DALF 10H/WEEK			
COMBINATION 15H SEMI-INTENSIVE + 15H INDIVIDUAL LESSONS			
COMBINATION 15H SEMI-INTENSIVE + 5H INDIVIDUAL LESSONS			
OTHER			

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ACCOMMODATION (SUBJECT TO AVAILABILITY)

ACCOMMODATION OPTIONS (CHOOSE ONE)	NUMBER OF WEEKS	START DATE dd/mm/yyyy	END DATE dd/mm/yyyy
STANDARD HOST FAMILY HALF BOARD (BREAKFAST + DINNER)			
EXECUTIVE HOST FAMILY HALF BOARD (BREAKFAST + DINNER)			
STUDIO IN RESIDENCE			
<i>PLEASE NOTE THAT WE HAVE RESIDENCES AVAILABLE IN SEVERAL LOCATIONS CLOSE TO THE SCHOOL. STUDENTS WILL BE PLACED ACCORDING TO AVAILABILITY.</i>			

STUDENT PROFILE

FOOD REQUIREMENTS / ALLERGIES (HALAL/VEGETARIAN/GLUTEN-FREE ETC) SUPPLEMENT: 30€/WEEK	
SMOKING (YES/NO)	
ANIMALS (YES/NO)	
OTHER	

TRANSFERS

WOULD YOU LIKE FRENCH IN NORMANDY TO ORGANIZE YOUR TRANSFER? (mark an X)	YES		NO	
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ARRIVAL DATE		AIRPORT/PARIS STATION	
SHARED TRANSFER (YES/NO)		PRIVATE TRANSFER (YES/NO)	

DEPARTURE DATE		AIRPORT/PARIS STATION	
SHARED TRANSFER (YES/NO)		PRIVATE TRANSFER (YES/NO)	

By completing this form, you accept the general conditions of sale of French in Normandy on behalf of the student above.

SIGNATURE

DATE

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