



ENROLMENT FORM

I wish to enrol in the **Day** or **Evening** course
(name of course)

which will be held on:

Mondays Tuesdays Wednesdays
Thursdays Fridays or Saturdays

commencing the
(commencement date)

Make your cheque or money order payable to: **Italia 500.**

Name

Address

State Postcode

Tel (Home)

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Italian Centre for Language
& Cultural Studies

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