Welcome to *Italiano!* Welcome to *Italy*!

The Italiano Language Center of Buckhead – Sandy Springs Invites You To
Discover the Language and Experience the Culture of *La Bella Italia*!

**6-Week Italian for Beginners – Once Weekly Special!**

These 6-week Italian for Beginners Series Courses are customized for students seeking an introduction to the Italian language and/or planning a trip to Italy. More practice to support basic phraseology with some structure. Basic conversation supported by audiovisuals to enhance comprehension and ability to handle everyday situations.

At the end of this course, students may continue enjoying the learning by renewing in the same class or moving to another course.

**Travel Orientation – Cross-Cultural Interaction – Do’s and Don’ts.**
Native Italian instructors who also live part-time in Italy are happy to share experience and answer questions.

6-week courses start as little as **$165.00**

No Registration Fees
Add Conversation Course and get **10% Discount**
Native Italian Instructors
Affordable Rates. Scroll down to the registration page
Free Live Connections with Italy on Daytime and Saturday’s Small Groups – Friendly Atmosphere – Fun and Relaxed Travel Orientation – Cross Cultural Interaction – Do’s and Don’ts

**Italiano Language Center**
[www.italianolanguagecenter.com/italiano/home.htm](http://www.italianolanguagecenter.com/italiano/home.htm)

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5064 Roswell Rd, NE, Building D, Suite D-302 Atlanta, GA 30342  
Tel: **404.250.1122**  
[italiano86@italianolanguagecenter.com](mailto:italiano86@italianolanguagecenter.com)

Fax: **404.891.5767**  
6-week Italian for Beginners Registration and Schedule 2017

**Become a Fan!**
[www.facebook.com/ItalianoLanguageCenter](http://www.facebook.com/ItalianoLanguageCenter)
6-Week Italian for Beginners – Once Weekly – Schedule-Registration Form - 2017

<table>
<thead>
<tr>
<th>STARTING DATE</th>
<th>TIME</th>
<th>COST* per course per student</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Saturday, May, 20</td>
<td>11:00 am – 12:30 pm</td>
<td>6-Week (6 Lessons), 90-Minute Lesson</td>
</tr>
<tr>
<td>□ Tuesday, May, 23</td>
<td>6:00 pm - 7:30 pm</td>
<td>□ $179 charge □ $165 cash*</td>
</tr>
<tr>
<td>□ Tuesday, May, 23</td>
<td>7:45 pm - 9:15 pm</td>
<td>For better learning, add Conversation Course and get 10% Discount</td>
</tr>
</tbody>
</table>

*Textbook: Italian in 10 Minutes a Day by Kristine Kershul Not included. Available at bookstores and online.

DEADLINE: The day before the starting of the above courses

Please read carefully and complete all sections then sign below.
- Payment is required in advance.
- By signing up for this course you are making a commitment to attend classes each week at the scheduled time. Your consistent attendance will provide you with a more complete learning experience. Your course has to be completed within the registration period. No makeups.
- In case you decide to withdraw from this course, please notify us in writing before 5:00 pm at least three business days prior to the class starting date. A full refund will be issued, minus a $30 processing fee. No refunds will be allowed after a class begins.

Prices, policy and class schedule are subject to change without notice.

REGISTRATION INFORMATION

First name ___________________________ Middle ___________________________ Last name ___________________________
Company ___________________________ Job Title ___________________________
Street ___________________________ City ___________________________ State _____ Zip ________

Cell ___________________________ □ Texting □ WhatsApp □ Messenger □ Viber Other ___________________________

Email: ___________________________ Facebook: ___________________________

PAYMENT INFORMATION

□ Cash □ Check payable to Ital MultiLanguage or □ Visa □ Master Card □ Discover □ Amex

Credit Card #: ___________________________ CVV ___________ Expiration Date ___________

Name as it appears on the credit card ___________________________

Billing address of the Credit Card: Street ___________________________ City ___________________________ State _____ Zip ________

Your signature below indicates your acceptance of the terms as stated above

Authorized Signature ___________________________ Date ___________________________

Learn – Speak – Interact – Improve Your Skills

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Student information: To help us providing you with the best study program we need to know more about you. Please complete all parts below including any comment and special requirements.

Thank you and welcome to Italiano Language Center – Centro Lingua & Cultura.

Name ____________________________ Cell # ______________________ E-mail ____________________________

How did you learn about us? □ Internet □ Flyer □ Brochure □ Newspaper □ Direct mail □ Referred by ____________

Why do you want to study Italian? □ Business □ Travel □ Both □ Other ____________________________

Have you studied Italian? □ Yes □ No □ If so, when? ________________ For how long? ____________________________

What other language(s) do you speak, read and write? ____________________________________________________

Have you traveled to Italy? □ Yes □ No □ If so, when? ____________________________

Are you planning a trip to Italy? □ Yes □ No □ Business □ Travel □ Both □ If so, when? ____________________________

Are you interested having information about □ Accommodation □ Excursion □ Tour guide □ Cooking classes □ Wine tasting □ Other ____________________________

Are you interested in continuing Italian study after this course? □ Here □ In Italy, when? ____________________________

What do you expect from this course? ________________________________________________________________