

TEF Study – Payment information
French Institute Alliance Française
(to be filled out by each candidate)

First / Last Name: _____ Date of the session: _____

Please indicate your status and the sections you choose by checking the appropriate boxes:

- I am a FIAF student / active member (membership # _____)
- I am NOT a FIAF student / member

Please circle your choice

	FIAF Members	Non-Members
All sections below	\$450	\$485
Listening Comprehension	\$100	\$115
Reading Comprehension	\$100	\$115
Vocabulary and Structure	\$100	\$115
Optional Written Expression	\$100	\$115
Optional Oral Expression	\$100	\$115

- I understand there is a \$5.00 administration fee in addition to the exam fee.

PAYMENT METHOD

- MasterCard AMEX Visa # _____

Name on card: _____

Exp. Date: __ / ____

CVV: _____

PLEASE EMAIL BOTH REGISTRATION AND PAYMENT FORMS, AND A PHOTOCOPY OF YOUR PASSPORT OR YOUR ID IN PDF FORMAT TO: languagecenter@fiaf.org

I understand that should I fail to be present the day of the examination, the fees of the units I have registered for will not be refunded to me.

Candidate's signature _____

I heard about the TEF Study from _____

THANK YOU!