



# Cours communaux de langues modernes

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**ONLY THE DULY COMPLETED DOCUMENTS WILL BE CONSIDERED**

## REGISTRATION FORM - C.C.L.M. 2021 – 2022

**(name and address as mentioned on I.C.)**

Mr  Mrs  Miss

Surname : .....  
**(maiden name for women)**

First Names : .....

Date of birth : .....

Place of birth : ..... contry: .....

Nationality:.....

**Address in Belgium** : .....

Street:..... Number.....

Box:..... area code:..... locality:.....

Mobile **(Belgium number only)**:.....

Private:.....

Email : .....

Number plate : .....

Bank account number: BE.....

(In case of refund for fee reduction)

### REGISTRATION IN THE COURSE OF LANGUAGE(S)

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ACTIRIS  FOREM  VDAB  CPAS  -18 y  PHARE

OBLIGATION OF PUBLIC AUTHORITY

**If -18 years fill in an under-age form at the secretariat.**

**For receipt and acceptance of school regulations.**

WOLUWE-SAINT-LAMBERT, date .....

SIGNATURE OF THE STUDENT: