



**Build
confidence
in speaking!**

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**Review grammar
over summer
months!**

Spanish for Teens!

Who: Students entering 6th – 9th grade

What: “Los Chavos” (teens) – A special class offered for Middle and High School Students — This class covers vocabulary and conversation of interest to today's teens. The focus is to practice conversation and pronunciation skills, as well as review grammar to supplement school-based classes. Program uses a full-immersion approach. Students will be assessed prior to first class. Final summer schedules may be adjusted to enable grouping of students according to proficiency.

Min 3 / Max 8 students per class.

Instructor: **Mr. Cesar Martinez**, a native of Mexico, has been teaching middle school students at Stanley Middle School and Contra Costa Jewish Day School, as well as our Viva el Español location in Lafayette.

Where: Viva el Español, Lafayette

When: 5:00 pm – 5:50 pm, Tuesdays and Wednesdays

Dates: June 14 – Aug. 17

Tuition: \$275 (20 classes)
• 10% discount for second sibling



Registration: To reserve your spot, **please fax or mail the attached form** to Viva el Español to the address below.

To schedule a **free trial class** or for more information,
please contact Viva el Español at 925-962-9177.

Vocabulary, grammar & conversation for teens - in “español”!

Viva el Español
3451 Golden Gate Way, Lafayette, CA 94549
(925) 962-9177 phone • (925) 962-9127 fax
www.vivaelespanol.org

COMMUNITY BASED • NOT FOR PROFIT



Viva el Español Student Registration Form

Parent Names _____ Student Name _____

Address _____ Grade & School Fall 2011 _____ Birthdate _____

Home Phone _____ Cell _____ Email _____

Spanish Proficiency & Student Interests

Spanish Proficiency (1=no knowledge, 5=fully bilingual):

Comprehension: 1 2 3 4 5

Conversation: 1 2 3 4 5

Grammar: 1 2 3 4 5

Prior exposure to Spanish (check all that apply): Middle/High School Spanish - # years/levels? _____

Immersion pre-school – how long? _____ Parent(s) speak at home Other family members Childcare provider

TV Books Music Trips Other _____

What are your objectives in enrolling your child in this class? _____

What are your children's favorite activities and interests? _____

Allergies or other medical concerns (please mark N/A if none): _____

Please share with us any other information about your children that you think would be helpful, including the name of the textbook used at school if you know it: _____

Internet Publishing Parent Authorization

I give permission to ¡Viva el Español! to publish the following on their website, electronic newsletter and marketing materials:

Yes No Individual student work by my son/daughter, including but not limited to drawings and writing

Yes No Photographs of Viva el Español activities that may contain my student's photograph.

Student photographs shall NOT be identified by students' names. Parent Initials: _____ Date: _____

Payment Information

Enclosed is my check for \$275 made payable to Viva el Español

Please bill \$275 to my VISA Mastercard # _____ exp. _____

Tuition is non-refundable. Tuition for missed classes may be applied towards private lessons only with notification 24 hours prior to missed class.

Please mail or FAX this form to:
Viva el Español, 3451 Golden Gate Way, Lafayette, CA 94549
Ph: 925-962-9177 FAX: 925-962-9127

For office use only:
Los Chavos
____ MB
____ CC