

INVOICE

Spanish Language Immersion Program
123 Calle de Educaci3n
Madrid, Spain

Invoice #: _____
Date: _____

Bill To:

Student Details:

Name: _____
Level: _____
Term: _____

Description	Quantity/Weeks	Unit Price	Total
Spanish Intensive Course Tuition			
Immersion Housing / Homestay			
Cultural Activities & Excursions			

Description	Quantity/Weeks	Unit Price	Total
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Instructional Materials & Textbooks			
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Subtotal: \$_____

Tax/Fees: \$_____

Grand Total: \$_____

Please make checks payable to "Spanish Language Immersion Program".
Payment is due within 15 days of invoice date.

¡Muchas gracias por estudiar con nosotros!