

Student Information

Family name _____	First name _____	<input type="checkbox"/> Female <input type="checkbox"/> Male
Date of birth _____	Nationality _____	Country of birth _____
Passport Number _____	Passport expiration date _____	Type of visa, if applicable _____
Address / Street _____	City _____	Postal Code _____
Email _____		Telephone / day _____
Telephone / evening _____	Mother tongue _____	Other languages _____

Language skills

What is your own assessment of the present level of your skills in the language(s) that you would like to learn / improve? (Eurocentres language levels see page 9)

Language Language 2 (if applicable)

School and Course Information

School _____	School _____
Course type (20/25/30 lessons/week) _____	Course type (20/25/30 lessons/week) _____
Start date _____	Start date _____
Number of weeks _____	Number of weeks _____

Specialised intensive (25 lessons) or Specialised Super-Intensive (30 lessons) Courses: Please select your specialisation for the afternoon lessons. You will study the chosen topic for the entire duration of your course. A change of subject of specialisation is possible after 4 weeks, provided your school can agree to it. If you cannot make a decision at this stage, we suggest the General Language option.

Desired Specialisation _____ Lessons Number of weeks _____

Are you interested in taking an examination (i.e. IELTS, FCE etc.) yes no If so, which? _____

Are you interested in receiving US credits? yes no

Accommodation and Transfer

Arrival date* _____	Departure date* _____
<input type="checkbox"/> Taxi transfer on arrival	Airport/Train station of arrival _____
* Accommodation for Eurocentres courses is mostly reserved from Saturday to Saturday.	If choosing homestay please answer the following:
<input type="checkbox"/> Homestay, single room, half board	Do you smoke? <input type="checkbox"/> yes <input type="checkbox"/> no
<input type="checkbox"/> Student residence / shared apartment	Would you stay in a family with smokers? <input type="checkbox"/> yes <input type="checkbox"/> no
<input type="checkbox"/> other, please, specify _____	Do you have special requests related to medical conditions, allergies or diet? _____
<input type="checkbox"/> I will arrange my own accommodation	_____

Insurance

I wish to book the insurance covering cancellation and return travel costs. I wish to book the Security Package insurance.

Special Offers

Please specify and fill in your promotion code _____
 Special offers and promotions are only valid when submitted with the booking.

I hereby confirm that I have carefully read the General Terms and Conditions of Business specified and declare that they should form an integral part of the present contract. Please note that any changes to bookings will be subject to a processing charge (§ 7 Standard Terms of Business, page 61– 63).

Date _____	Signature _____
Signature and address of parent/guardian is required for students under the age of 18 years or where the student despite having reached the age of 18 is not deemed capable of being a contracting party by his or her country of residence (Clause 1 General Terms and Conditions of Business)	

Family name _____ First name _____ Tel. Home _____

Address; Postcode; Town; Country _____

Please Note: Depending on your nationality and your course destination we may require you to submit further documentation.

Please send the completed enrolment form today to one of the following addresses:

Eurocentres, Seestr. 247, CH-8038 Zurich Tel. +41 (0)44 485 50 40 Fax +41 (0)44 481 61 24
Eurocentres, 56 Eccleston Square, UK-London SW1V 1PH Tel. +44 (0)20 7963 8450 Fax +44 (0)20 7963 8479
enrolment@eurocentres.com Skype eurocentres_sales eurocentres.com or your enrolment office.