

Summer School Individual Booking Form

Personal Information

Family Name:		Male: <input type="checkbox"/>	Female: <input type="checkbox"/>
First Name:		Date of Birth:	
Nationality:		First Language:	
Home Address:			
Passport Number:		Expiry date:	
Student's mobile number:			
Home telephone number:			
Fax: (including country and local code)			
Parent's e-mail address:			
Does the student suffer from any illnesses or food allergies which may require special attention? If yes, please give details:			
Student's level of English: Beginner: <input type="checkbox"/> Pre-Intermediate: <input type="checkbox"/> Intermediate: <input type="checkbox"/> Advanced: <input type="checkbox"/>			

Information about parents / legal guardians / agents

Parents' or Guardians' names:			
Address (if different from above):			
Emergency Telephone Number(s):			
Medical Consent: <i>I hereby authorise a representative of Saint Michael's College to seek medical treatment in our absence. If an important medical decision needs to be made and there is time to contact us, then please do so. If contact is not possible, we authorise medical treatment.</i>			
Parent's signature: _____			
Photography Consent: <i>Occasionally photographs are taken during school lessons, activities and excursions to be used in the school marketing materials. These photographs help us attract more students from even more countries and ensures that the summer school continues to develop. We would appreciate your consent.</i> <i>I give consent for my son's/daughter's photographs to be used for such purposes.</i>			
Parent's signature: _____			

Agent's details (if applicable)	Agency Name:	Contact Person:	Email / Telephone number / Fax:
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Course Details (the course runs for 8 weeks over July and August):

Course Length: _____ weeks (minimum 2 weeks—maximum 8 weeks)

Arrival date: Sunday _____ June/July/August

Departure date: Sunday _____ July/August

How did you hear about Saint Michael's College?

Agent Friend Internet search engine Other (Please specify): _____

Please return form to: smc.summer@kingsgroup.org