



ST JOHN'S BEAUMONT

SUMMER LANGUAGE SCHOOL 2017

REGISTRATION FORM

PERSONAL DETAILS

Family Name

First Name

Preferred Name (known as)

Sex

MALE / FEMALE

Date of Birth (as DD/MMM/YYYY)

Age at 16-Jul-2017

Mother Tongue

Nationality

Passport number and expiry date

Level of English

BEGINNER / ELEMENTARY / LOWER INTERMEDIATE /
INTERMEDIATE / UPPER INTERMEDIATE

HOME ADDRESS (ALL CORRESPONDENCE WILL BE SENT HERE)

Parent Contact (Mr/Mrs/Dr/Other) First Name Surname

House name/number

Street

Town

Country

Post Code

Home Telephone Email

Mobile Telephone

WHO CAN WE CONTACT IN AN EMERGENCY?

Name Relationship to student

First Telephone Contact, name and number (please include all digits as dialled **from** UK including country code e.g. 00 34 XXX XXXX)

Second Telephone Contact, name and number (please include all digits as dialled **from** UK including country code e.g. 00 34 XXX XXXX)

MEDICAL & DIETARY INFORMATION

Does your son/daughter have a medical condition or disability we should know about?	Yes	No
Does your son/daughter have any allergies (e.g. to animals, food, medicines)?	Yes	No
Does your son/daughter have any special dietary requirements?	Yes	No
Does your son/daughter currently receive additional support for a learning disability (e.g. dyslexia, dyspraxia)?	Yes	No

If you have answered 'Yes' to any of these questions or have any other special requests, please give details :

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COURSE AND FEE

COST £

Sunday 16th July – Saturday 5th August 2017

TOTAL COURSE COST

£3,150

For bookings made up until 14th April 2017 please transfer 25% deposit (£787.50) with balance (£2,362.50) to be paid by 16th June 2017

For bookings made after 14th April 2017 please transfer full course fee of £3,150

BANK DETAILS

Account Name	St John's Beaumont	Sort Code	40-05-20
Bank	HSBC Bank plc	Account No.	91363344
	69 Pall Mall	IBAN	GB35MIDL 400
	London SW1Y 5EY		520 9136 3344
		BIC/Swift Code	MIDLGB2107J

Please quote reference SLS17 plus your surname

AGREEMENT

Notes:

Registrations will be considered in the order they are received and the offer of a place is subject to availability. Two signatures to the registration form are required unless impracticable. Please return this form with the appropriate fee and transfer advice. The deposit is non-refundable except if the Summer Language School does not take place.

DECLARATION

We request that our above named son/daughter be registered onto the St John's Beaumont Summer Language School 2017.

Signed (Father) Signed (Mother)

PRINT NAME PRINT NAME

Date Date