

## Summer Schools Enrolment Form 2008

Please print clearly in CAPITAL LETTERS.

Please fax or send this form to the Student Enrolment Advisors UK:

Brighton Study Centre, Billinton Way, Brighton, East Sussex BN1 4LF. Fax +44 1273 339398

Your Student Enrolment Advisor

### About you

Family name		First names	
<input type="checkbox"/> Male	<input type="checkbox"/> Female	Date of birth d d / m m / y y	Country of birth
Citizenship		Passport number	Your own language
Your (student's) home address including post/zip code (MANDATORY)			
Country	Telephone (student)	Mobile telephone (student)	Fax
Email		Your profession	
How did you hear of Embassy CES Summer?			
Who will be paying for your course?		Company name	
<input type="checkbox"/> Yourself	<input type="checkbox"/> Parents	<input type="checkbox"/> Company	
Your present level of English:			
<input type="checkbox"/> Beginner	<input type="checkbox"/> Elementary	<input type="checkbox"/> Pre-intermediate	<input type="checkbox"/> Intermediate
<input type="checkbox"/> Upper-Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Proficient	

### The course you want to follow

Please check that the course you want to follow is available in the location of your choice. There is space below for you to enrol on more than one course if you wish.

(1) Location/centre			
Course name	Course code	Start date	Number of weeks
(2) Location/centre			
Course name	Course code	Start date	Number of weeks
Optional extras	<input type="checkbox"/> Embassy i-Study		

### The accommodation you want

Course 1: accommodation type (Homestay or residential)	Start date	Finish date
Course 2: accommodation type	Start date	Finish date

Do you smoke?  Yes  No

Please give details of any special requirements or other information the host family or residence should know about. (e.g. Halal, vegetarian, allergies to pets, etc.)

Do you have any allergies or medical conditions?  Yes  No If yes, please explain on a separate sheet

Will you be applying for a student visa?  Yes  No

## StudyCare health, medical and travel insurance

I require StudyCare health & medical insurance  I have alternative cover and do not require StudyCare insurance

PERIOD OF COVER	USA	PERIOD OF COVER	USA	PERIOD OF COVER	USA	PERIOD OF COVER	USA	UK PRICES £8 PER WEEK REGARDLESS OF COURSE LENGTH
Up to 2 weeks	\$85	Up to 8 weeks	\$217	Up to 5 months	\$447	Up to 8 months	\$657	
Up to 4 weeks	\$124	Up to 3 months	\$299	Up to 6 months	\$517	Up to 9 months	\$727	
Up to 6 weeks	\$173	Up to 4 months	\$371	Up to 7 months	\$587	Up to 12 months	\$856	

## Airport transfers

Do you require transfers to and/or from the airport (available as listed in the tariff)  Arrival only  Departure only  Both ways  Not required

Arrival:	Date d d / m m / y y	Time	Departure airport	Arrival airport	Flight no.
Departure:	Date d d / m m / y y	Time	Departure airport	Arrival airport	Flight no.

## Important You must also complete this section

### If you are going to study in England

Payment: The enrolment fee of £70 is required at the time of booking.

I enclose an enrolment fee of £70  I have sent £70 direct to your bank  
 I have paid all monies to my agent

Please indicate your preferred method of payment:

1, Cheque (UK pounds sterling only)  2, Bank transfer  3, Credit card

1 By mail – by cheque in UK pounds sterling drawn on a UK bank and made out to Embassy CES sent to: Embassy CES, Admissions Office, Lorna House, Lorna Road, Hove, East Sussex, BN3 3EL, United Kingdom.  
 2 By bank transfer – account name: Embassy CES – Account number: 01025996 Bank sort code: 53-61-02, Bank address: National Westminster Bank, 103 Church Road, Hove, East Sussex, BN3 2BF, United Kingdom. Swiftcode: NWBKGB2L. Please include the following IBAN number if relevant: GB95NWBK53610201025996. Please note that we are unable to accept payment by Eurocheque. Please ensure that all payments and transfers include full booking and client details.

### If you are going to study in the USA

Payment: The enrolment fee of US\$135 is required at the time of booking, plus US\$250 accommodation deposit if accommodation is booked through us.

I enclose an enrolment fee of US\$140 (non-refundable)  I have sent US\$140 or US\$390 direct to your bank  
 I enclose an accommodation deposit of US\$250  I have paid all monies to my agent  
 Documentation via Express Mail – \$55 extra

Please indicate your preferred method of payment:

1, Cheque or travellers cheque (US\$ only)  2, Bank transfer\*  3, Credit card  
\*subject to a \$25 bank fee

1 By mail – by cheque made payable to Center for English Studies in US dollars drawn on a US bank, a US dollar money order or in US dollar travellers cheques, sent to: Embassy CES Admissions Office, Level 2, 330 7th Avenue, New York, NY 10001, USA  
 2 By bank transfer – account name: Center for English Studies – Account number: 94172-01490, Bank routing number 0260-0959-3 Bank address: Bank of America, 1185 Avenue of the Americas, New York, NY 10036, USA, Swift Code BOFAUS3N. Please ensure that all payments and transfers include full booking and client details.

## Payment

Bank account and other details are given in the sections above for each country. We also accept payment by international credit card (Mastercard, Visa and American Express). If you wish to pay by international credit card, please complete the following section:

I hereby authorise Embassy CES to charge US\$/UK£  to my credit card

Mastercard  Visa  American Express  Card number  Expiry date  Security code (UK)

Name and address of card holder (mandatory)  Signature of card holder  
 Please deduct the final balance from this credit card on the due date

### For all students to complete – your agreement and signature:

- I have read and understood the terms and conditions outlined in the relevant Embassy CES terms and conditions of enrolment documentation, including the cancellation and refund policy.
- I have read and understood the relevant schedule of costs set out in the current Embassy CES price lists and hereby affirm that I have sufficient funds to pay for all tuition costs as well as the cost of all food, accommodation and all other personal expenses during the full period of my course at Embassy CES.
- I authorise Embassy CES to take appropriate action in the event of a medical emergency and I understand that I am responsible for all medical bills incurred.
- I certify that all the information given by me in this enrolment form is accurate and complete.

Signature of applicant  Date  Signature of parent or guardian  Date

If the applicant is under 18, a parent or guardian who, in doing so, agrees to all Embassy CES conditions, must sign this form and guarantee the necessary funds for the applicant.

Relationship to applicant