

action english

Registration Form 2011

Please write in CAPITALS, complete all sections of the form and return it as soon as possible.

1. Family Name.....
2. First Name(s).....
Boy Girl
3. Name by which he/she likes to be called.....
4. Date of Birth (day/month/year).....
5. Nationality.....Mother Tongue.....
6. Desired course dates:
 10th - 17th July
 17th - 24th July
 24th - 31st July
7. Parent/guardian names.....
8. Address.....
.....Town.....
Postcode.....Country.....
Telephone
- Alternative telephone in case of emergency.....
- Your email
9. Student's email address (if any).....

10. Can we put you in contact with other parents so that children can travel together? YES NO

11. How would you describe your child's level of English?

Beginner Elementary Intermediate Advanced

12. Are there any particular aspects of your child's English you would like us to focus on?

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13. If there is a choice do you prefer your child to be placed in a class:

By age? By ability?

14. Can your child swim? YES NO

15. Does your child have any existing medical issues we should be aware of (including allergies)?

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16. Does your child have any special dietary requirements? If so please give details.....

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17. Please describe your child's personality

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18. Where did you hear about Action In English? (eg website, word of mouth etc – please be as specific as possible)

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19. May we use photos of your child whilst studying or during sporting activities for our publicity material? YES NO

20. I declare to the best of my knowledge that my child is in good physical and mental health. In the event of illness or injury, I agree to my child receiving treatment from the attending medical practitioner YES NO

21. I accept the Terms & Conditions as published on the *Action in English* website YES NO

22. I declare that the information I have submitted is true and correct

Signed..... Date

Relation to child.....