

Registration Form

First name _____
Family name _____
Birthday (Day/Month/Year) _____ / _____ / _____
Sex ☐ Male ☐ Female
Nationality _____
First Language _____
Passport Number _____

Please attach
your photo here.

Visa type you will study on:

- ☐ Student Visa
☐ Visitor Visa
☐ Working Holiday Visa
☐ Other

Address in Home Country:

Street _____
City _____
Province/State _____ Postal Code _____
Country _____
Telephone _____ Emergency No _____
Fax _____
Email _____

Immediate Contact (if different from home address)

Street _____
City _____
Province/State _____ Postal Code _____
Country _____
Telephone _____ Emergency No _____
Fax _____
Email _____

Which Location:

- ☐ Vancouver ☐ Victoria ☐ Toronto ☐ Calgary
☐ Hawaii

How did you find out about Global Village?

fremdsprachen24.de
Martin Schnell und Daniel Markgraf GbR
Hardenbergstr. 11a
04275 Leipzig (Germany)

Phone: +49 (0) 170 387 42 40
Fax: +49 (0) 351 563 61 58

E-Mail: info@fremdsprachen24.de
Web: www.fremdsprachen24.de

Courses

(Contact school for course availability)

- English speaking ability ☐ Low ☐ Medium ☐ High ☐ Very high
☐ General English
☐ Business English
☐ Cambridge Preparation (☐ PET ☐ FCE ☐ CAE ☐ CPE)
☐ Teacher Training
☐ English Plus _____
☐ Cambridge/IELTS Support
☐ TOEIC Preparation
☐ TOEFL/IELTS Preparation
☐ Work Experience
☐ Summer Teen Activity
☐ English for Academic Purposes (☐ EAP1 ☐ EAP2 ☐ EAP3)
☐ Private Lessons
☐ High School Preparation
☐ Special requests? _____
Lessons/week _____

Intended Period of Study _____ weeks

From (Day/Month/Year) _____ / _____ / 20 _____
To (Day/Month/Year) _____ / _____ / 20 _____

Accommodation

- Accommodation required? ☐ Yes ☐ No
Do you have any allergies? ☐ Yes ☐ No
Do you have any health problems? ☐ Yes ☐ No
If YES, give details: _____

Do you have any special diet requirements? _____

- Do you smoke? ☐ Yes ☐ No
Will you live with a family that has:
Smokers ☐ Yes ☐ No
Dogs ☐ Yes ☐ No
Cats ☐ Yes ☐ No
Young Children ☐ Yes ☐ No

Interests: _____

Placement Preference

Please list your order of preference from 1 to 3 (1 is your first choice).
GV cannot guarantee your first choice.

- ____ Family with young children
____ Family with teenagers
____ Family with no children ☐ It does not matter

Choice (Where available. Check fee schedule)

- ☐ Full board ☐ Half board
☐ Single room

Expected Period of Homestay _____ weeks

From (Day/Month/Year) _____ / _____ / 20 _____
To (Day/Month/Year) _____ / _____ / 20 _____

Emergency Contact Person:

Name _____
Telephone Number _____

For other accommodation options (apartments, hostels, guest houses, student house, residence) contact schools directly for availability.

Flight Details

Airline & Flight # _____
Expected arrival date _____
Time of arrival _____
Airport transfer ☐ One way ☐ Two way

Declaration

I have read and agree to be bound by the General Conditions and the Cancellation and Refund Policy.

Name (Print): _____

Signature: _____

(Signature of applicant, or parent if applicant is under age)

Method of Payment

- ☐ Bank transfer ☐ Bank draft ☐ Cash ☐ Bank cheque
☐ Credit card ☐ VISA ☐ Mastercard

Card Number _____ Expiry _____

Amount _____ ☐ USD ☐ CAD

Card Holder Signature _____

Please fax registration forms to:

+49 (0) 351 563 61 58