

**For office use only:**

Ref Number: \_\_\_\_\_ Date Rec: \_\_\_\_\_ Date Proc: \_\_\_\_\_

**Personal Details:**

 Mr/Mrs/Miss: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_ Post Code: \_\_\_\_\_  
 Tel No: \_\_\_\_\_ Mobile No: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Nationality: \_\_\_\_\_

**Agent Information (If applicable):**

 Agent Name: \_\_\_\_\_ File No: \_\_\_\_\_  
 Agent Address: \_\_\_\_\_  
 \_\_\_\_\_ Post Code: \_\_\_\_\_  
 Agent Tel No: \_\_\_\_\_ Agent E-mail: \_\_\_\_\_

**Emergency Contact Details**

 Mr/Mrs/Miss: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Relation to student: \_\_\_\_\_ Post Code: \_\_\_\_\_  
 Tel No: \_\_\_\_\_ Mobile No: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Course Information:**

 Course Name: \_\_\_\_\_ No of Weeks: \_\_\_\_\_  
 Start Date: \_\_\_\_\_ Finish Date: \_\_\_\_\_

**Accommodation:**

 Host Family  Hotel  B & B  None   
 Date of Arrival: \_\_\_\_\_ Date of Departure: \_\_\_\_\_  
 Can you stay with: Cats:  Y/N Dogs:  Y/N Children:  Y/N Do you smoke:  Y/N  
 Any Other requirements i.e diet: \_\_\_\_\_

**Other Information:**

 Any medical condition/s ie diabetic: \_\_\_\_\_  
 Do you have any difficulties that require any special needs to take full participation in the classroom i.e hearing, sight?  Y/N  
 (if yes please give details below)  
 \_\_\_\_\_  
 Do you have any physical/mobility needs that require special requirements to take part in every day activities in the school?  Y/N  
 i.e access for wheelchairs or a downstairs classroom (if yes please give details below)  
 \_\_\_\_\_

**Travel** (If you would like us to organise your transfers to or from your arrival destination, please fill out the information below)

Arriving At: _____	Departing: _____	One way taxi Transfer	<input type="checkbox"/>
Date: _____	Date: _____	Two way Taxi Transfer	<input type="checkbox"/>
Time: _____	Time: _____	Train	<input type="checkbox"/>
Flight No: _____	Flight: _____	Coach/Bus	<input type="checkbox"/>

**How will you be paying:**

By Bank Transfer (Account Details will be provided on the invoice)	<input type="checkbox"/>
Through Agent/Representative as above	<input type="checkbox"/>
By Cheque	<input type="checkbox"/>
By Credit Card	<input type="checkbox"/>
Sponsored by Embassy	<input type="checkbox"/>

*If you are a sponsored student, please provide sponsorship details with your application.*

I wish to enrol on a course with inlingua Cardiff as detailed above. I have read and agree to the terms and conditions of enrolment.  
*Please note, if the applicant is under 18 years of age, then the enrolment form must be signed by the Parent/Guardian.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please print and fill in this form and send it to the address below. Make sure you enclose the following documents to your application:

- Application form fully completed and signed. Your email address and phone number should clearly appear in order for us to contact you as quickly as possible.
- Provide transcripts of school results including subjects studied and grades obtained.
- Provide evidence of English language test results, or alternatively, state when you will sit the exam/receive results. In any case, you will still be asked to show evidence before starting the course and will not be accepted if you fail to do so.
- Provide a copy of your passport page with the photograph AND the passport number.

inlingua Cardiff  
 31 The Parade  
 Roath  
 Cardiff  
 CF24 3AD

Alternatively you can e-mail your application to:

[info@inlingua-cardiff.co.uk](mailto:info@inlingua-cardiff.co.uk)