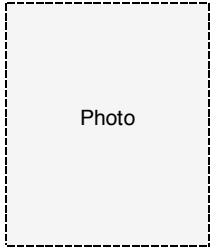




(For Office use only) On Reg On DB

Intensive School of English & Business Communication

ENROLLMENT FORM



Personal Details

Family Name _____ First Name _____
 Date of Birth _____ Male _____ Female _____ Nationality _____
 Address in your country _____
 Telephone Number _____ Fax Number _____
 Passport Number _____ E-Mail Address _____
 Do you have any allergies or Disabilities? _____

Course Requirements

Starting Date ____/____/____ Finishing Date ____/____/____
 Hours per week: 6 ____ 9 ____ 15 ____ 18 ____ 21 ____ 24 ____ 30 ____ Other ____
 Number of weeks: 2 ____ 3 ____ 4 ____ 6 ____ 8 ____ 10 ____ 12 ____ 16 ____ 24 ____ 36 ____ 48 ____ Other ____

General English Yes ____ No ____ IELTS Yes ____ No ____

Cambridge Examination KET ____ PET ____ FCE ____ CAE ____ CPE ____

LCCI Examination Courses English for Business (EFB) ____

Accommodation (Homestay) Do you want the school to arrange your accommodation? Yes ____ No ____

Do you smoke? Yes ____ No ____ Do you have a special diet? _____

Arrival & Departure details

Date of arrival ____/____/____ Arrival Time _____ Date of departure ____/____/____
 Name of Airport: Heathrow ____ Gatwick ____ Stansted ____ Luton ____ London City ____
 Airport Terminal: Heathrow: 1 ____ 2 ____ 3 ____ 4 ____ Gatwick: North ____ South ____ Other ____
 Do you want ISE to arrange an Airport Pick-up? Yes ____ No ____

Method of Payment

Debit / Credit Card _____ Bank Transfer _____ Agent _____
 Card Number _____ Expiry Date ____/____/____ Sec _____
 Card Type: _____ Start Date ____/____/____ Issue: _____



Acceptance

I accept the conditions of booking as stated in the brochure and enclose payment of £100 deposit (minimum) / full fees of £ _____ or proof of payment of this sum. I confirm payment of outstanding fees will be made 2 weeks before the course commences unless otherwise agreed by ISE.

Signature _____ Date _____

Please complete this form and send to ISE.

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