



Intensive School of English & Business Communication

YOUNG ISE – ENROLMENT FORM

Family Name _____ First Name _____

Date of Birth _____ Male Female Nationality _____

Address _____

Telephone Number _____ Fax Number _____

Passport Number _____ E-Mail _____

Emergency Contact Number _____ Contact Name _____

Any allergies or disabilities? _____

Start Date ____ / ____ / ____ Finish Date ____ / ____ / ____

Course Duration	2 weeks	3 weeks	4 weeks	5 weeks	6 weeks
Young ISE Course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	7 weeks	8 weeks	10 weeks	12 weeks	[] weeks
Young ISE Course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Help us choose the best accommodation for you:

Do you prefer: Homestay Accommodation ISE Residence

Do you like: children dogs cats theatre sport music visits

Arrival & Departure details

Date of arrival ____ / ____ / ____ Arrival time _____ Date of departure ____ / ____ / ____ Departure time _____

Airport of Arrival _____ Terminal _____

Airline _____ Flight Number _____ Airport Pickup Yes No

Method of Payment Bank Transfer Credit Card

Card Number Expiry Date /

Acceptance

I accept the conditions of booking as stated in the brochure and enclose a deposit of £150 / €200 or proof of payment of this sum. I confirm payment of outstanding fees will be made 3 weeks before the course commences unless otherwise agreed by ISE.

Signature _____ Date _____