

Agent Booking Form

Personal details:

| | | | |
|------------------|--|--|--|
| Last Name: | | First Name: | |
| Date of birth: | | Nationality: | |
| Sex: | | Passport details (please send a copy of the passport) | |
| Private Address: | | Phone number (parents): | |
| | | Phone number (student): | |
| Agency: | | Address: | |

Course details:

| | | | |
|----------------|--|--------------------|--|
| Course Centre: | | | |
| Programme: | | | |
| Arrival: | | Departure: | |
| Accommodation: | <input type="checkbox"/> Residence: <input type="checkbox"/> standard <input type="checkbox"/> en-suite <input type="checkbox"/> Homestay: <input type="checkbox"/> twin <input type="checkbox"/> single <input type="checkbox"/> (triple on request) <input type="checkbox"/> Hotel | | |
| Course Name: | | Number of lessons: | |

Other services (at supplement):

| | |
|---|--|
| Airport Transfer (please mark in detail): | <input type="checkbox"/> I don't need any transfer <input type="checkbox"/> YES (please specify below) <input type="radio"/> Low budget transfer (UK Juniors & Young Adults only) - on arrival and/or departure <input type="radio"/> Individual transfer - on arrival and/or departure |
| Name of Airport: | |
| Full flight details: | Arrival: Departure: |
| UM Services required (additional fees apply) | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| VISA | <input type="checkbox"/> I don't need a visa <input type="checkbox"/> YES, I need a visa. Please send me the invitation letter <input type="radio"/> By e-mail <input type="radio"/> By courier express (with supplement) |

learn more than a language

Additional information

| | |
|--|--|
| Allergies: (please specify in detail; e.g. pets, pollen) | |
| Medical information: (please specify in detail, please add information about medication) | |
| Diets: Vegetarian, vegan, gluten free, halal, lactose intolerance... | |
| Accommodation requests: | |
| Any other information that is important to know for our staff on site: | |

Student and parents have read and agree to the Terms & Conditions

Signature: _____ Date: _____

Parent signature if the student is under 18 years old.

NB all students under the age of 18 attending International Projects courses must be fully covered by health and medical insurance, including personal accident and civil liability insurance. Please send a copy of the insurance coverage with this booking form.

Please complete this booking form and send it to:

E-Mail: info@internationalprojects.com