**APPLICATION FORM – YOUNG ADULTS**

**This form should only be used for Young Adults starting in 2024.**

Please complete this form in full using CAPITALS or by computer.

Email your completed form to clients@londonschool.com

*Complete the form by typing in the grey areas of each section.*

**TYPE OF BOOKING**

|  |  |
| --- | --- |
| Agent name: |       |
| Agent email: |       |
| Agent phone: |       |

[ ]  Private [ ]  Agent

**COURSE PARTICIPANT’S DETAILS**

|  |  |
| --- | --- |
| Student First Name(s): |     |
| Student Family Name: |       |
| Student Date of Birth: |       |
| Student Passport Nationality: |       |
| Student First language: |       |
| Student Gender: | [ ]  M [ ]  F  |
| Student [Level of English](https://www.londonschool.com/online-english-level-test/): |       |
| How did you hear about us?  |       |
| Special requirements(e.g. wheelchair access, hearing, visual impairment, autism, other disabilities) |       |

|  |
| --- |
| **Parental Consent (for Invoicing)** |
| Parent 1 Name:  |       |
| Relationship to Student: |       |
| Parent 2 Name:  |       |
| Relationship to Student: |       |
| Contact information provided for?  | [ ]  Parent 1 [ ]  Parent 2 |
| Parent Email: |       |
| Parent Phone: |       |
| Parent Home Address: |       |
| Do they speak English? | [ ]  Yes [ ]  No |
| Please provide Parental Consent (tick box):  | [ ]  Yes [ ]  No  |

**COURSE SELECTION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Course (please pick the topic) | Start date | Finish date | Number of weeks (2) |
| 1 |         |        |       |        |
| 2 |         |        |        |        |
| 3 |         |        |        |        |

**TRANSFERS (available from major London airport)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date | Time | Airport | Terminal | Flight number | From |
| Arrival                                      |
| Departure                                     |
|  |

**PAYMENT**

**1. Calculation**

Young Adults Programme fee £3800

**Invoice**

Who is paying for this course? [ ]  My family is paying [ ]  My agent is paying

[ ]  Invoice to family: Name:

 Address:

[ ]  Invoice to agent: Agent name:

 Address:

**Payment method:**

[ ]  I would like to pay by Flywire (credit card), online payment platform -<https://www.flywire.com/pay/londonschoolenglish/>

[ ]  I would like to pay by Bank Transfer and I will provide a copy of the bank advice. I will pay all bank charges at my end.

**CONFIRMATION**

Yes, I have read and accepted the school’s terms and conditions of registration. I understand that I should have suitable insurance. Click here for the terms and conditions: <http://www.londonschool.com/terms/>

Please reserve me a place on the course(s) indicated.

**Signature of Parent:** **Date:**

Please do **NOT** make any travel arrangements before you receive confirmation from us that a place on your chosen course is available. Thank you for your booking. Please save this document for your records, before sending it to us.