

Enrolment Form

Please complete in CAPITAL LETTERS and return to:
Home Language International, Le Coronado, 20 avenue de Fontvieille, MC98000, Monaco
Fax: +377 97 70 74 71 hli@monaco.mc

1. Personal details

First name _____
Last name _____
Age _____ Sex _____
Address _____
Home tel (+ country code) _____
Mobile phone (Parents & Child) _____
Fax/Email _____
Your profession _____
Your nationality _____

Your native language _____
What language do you want to study? _____
How many years have you studied this language? _____
Your level:
 Beginner Elementary Low Intermediate Mid Intermediate Upper Intermediate Advanced
Hobbies/interests _____
 I smoke I don't smoke
 I will accept a family that smokes Non-smoking family requested
Special requirements _____
Allergies _____
Special medical/dietary requirements _____
Where did you learn about HLI? _____

2. Course details

Arrival date (dd/mm/yy) _____ Departure date (dd/mm/yy) _____ (Sunday to Sunday)

Choose **ONE** of the following 12 courses below:

1. Standard Course with _____ hours of lessons per week (choose 5, 10, 15, 20, 25 or 30) and _____ hours of Informal Activities (choose 5, 10, 15, 20, 25 or 30 or leave blank) + expenses supplement
2. Lessons Only with _____ hours of lessons per week (choose 15, 20, 25 or 30)
3. Sports
4. Culture
5. Leisure
6. Christmas/New Year Specials
7. Farmstay
8. Enchanted
9. Adventure
10. Online lessons
11. Accommodation only (half board)
12. Accommodation only (full board)

Type of Combined Language Course (e.g. tennis, cooking etc.) if applicable _____ Level of sport (beginner/advanced etc.) if applicable _____

Country where you want to go _____

Region in order of preference: (Please note that most families **do not** live in the city centre but in the surrounding region)

1 _____ 2 _____ 3 _____

Options

- | | | | | |
|---|---|--|--|---|
| <input type="checkbox"/> Private Bathroom | <input type="checkbox"/> Two Students | <input type="checkbox"/> Exam preparation | <input type="checkbox"/> 5 Star Luxury | <input type="checkbox"/> Business & Spec. Vocab |
| <input type="checkbox"/> Cocooning | <input type="checkbox"/> Accompanying person aged _____ | <input type="checkbox"/> V.I.P. Option for Juniors | <input type="checkbox"/> Crash course | <input type="checkbox"/> Groups |
| <input type="checkbox"/> Visa documents | <input type="checkbox"/> Family booking | <input type="checkbox"/> Special needs | <input type="checkbox"/> Special diet | |

I require a TRANSFER from: Location _____ On arrival On departure Both ways No transfer

Arrival details (airport, flight times, flight numbers etc.) if known:

ARR: _____ DEP: _____

If under 18, until what time can the student stay out without supervision at night? _____ Please tick this box if the student is travelling as an unaccompanied minor

3. Payment

- I enclose a copy of my bank transfer for a deposit of £100, €150 or US\$150 OR for the total fees if my arrival date is within one month.
 Check this box if you are paying the **FULL AMOUNT** 3 months before you start the course and receive a 10% discount. (If you do not check this box, the reduction cannot be given later)
 5% reduction for students aged 50+ 10% reduction for stays of 4 weeks or more

All payments to: Home Language International Ltd.

For Payments in Pounds Sterling: IBAN GB29 LOYD 3094 6102 8498 03 BIC: LOYDJES1001 SWIFT: LOYDGB2L

For Payments in Euros: IBAN GB70 LOYD 3016 6348 7565 20 BIC: LOYDJEH1 SWIFT: LOYDGB2L

For Payments in US Dollars: IBAN GB51 LOYD 3016 6348 7565 71 BIC: LOYDJEH1 SWIFT: LOYDGB2L

Bank Address: LLOYDS TSB Offshore Ltd., Jersey Business Centre, P.O. Box 10, 9 Broad Street, St. Helier, Jersey, Channel Islands JE4 8NG

I give permission for Home Language International Ltd. to charge my credit card for a deposit of £100, €150 or US\$150 and the balance one month before my arrival date unless I instruct HLI otherwise.

I give permission for Home Language International Ltd. to debit my credit card for the total fees.

Total Amount to be paid £ _____ € _____ US\$ _____

Credit Card Type: VISA MASTERCARD AMERICAN EXPRESS (payment in GBP)

Number _____ / _____ / _____ / _____ Expires _____ / _____ Security Code number _____

I agree to the Terms and Conditions. I fully understand and agree unconditionally that Home Language International reservation office must be notified of any problem or complaint before the end of the stay. I agree that if this is not done, no claims against HLI will be considered for any reason whatsoever.

Date (dd/mm/yy) / / Signed (Parent or Guardian if the student is under 18)