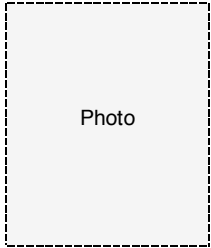




(For Office use only) On Reg  On DB

# 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: \_\_\_\_\_



(No charge)



(2.5%)



(2.5%)



(4.5%)

### 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.

Fax: +44(0)1273 236872 Email: info@ise.uk.com Post: 34 Duke Street, Brighton, East Sussex, BN1 1BS, England www.ise.uk.com  
or

Fax: +44 (0)1273 357224 Email: hoverception@ise.uk.com Post: 2 The Drive, Hove, East Sussex, BN3 3JA, England www.ise.uk.com