



755 Grande Allée Ouest
Québec (Québec) G1S 1C1 Canada

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Package Application Form Winter Camp

Personal Information

Male Female

Name: _____ Date of Birth (dd/mm/yy): _____

Family Name: _____ Nationality: _____

Address: _____ City: _____

Postal Code: _____ Country: _____

Telephone: _____ Fax: _____ E-mail: _____

Emergency Contact

Name: _____ Family Name: _____ Country: _____

Telephone: _____ Fax: _____ E-mail: _____

Desired start date

Select number of week courses and desired start date
(courses are offered from January 11 to February 12)

Week(s)	1	2	3	4
01/11				
01/18				
01/25				
02/01				
02/08				

Desired package

- Package 1 (P1): Multi Activities Package
 Package 2 (P2): French + Skiing
 Package 3 (P3): French + Snowboarding
 Package 4 (P4): French + Figure Skating

Airport Pick Up

Arrival date (dd/mm/yy): ____ / ____ / ____

Time: _____ AM PM

Airport: _____

Airline: _____

Flying from: _____ Flight Number: _____

Select Accommodation

- Homestay 3 meals per day
 Hotel (groups of 12 students or more)

First day of Accommodation (dd/mm/yy): ____ / ____ / ____

Last day of Accommodation (dd/mm/yy): ____ / ____ / ____

Number of weeks: _____ Extra days: _____

For Homestay Request Only

Do you have any allergies? Yes No

If yes specify: _____

Are you vegetarian? Yes No

Do you take any medications? Yes No

If yes specify: _____

Do you like children? Yes No

Do you like pets? Yes No

Would you mind to stay with a smoker? Yes No

Describe your hobbies and interests: _____
