



## Regular Application Form (not packages programs)

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

### Edu-Inter offers French courses until August 13, 2010

#### French Intensive Course (25 hrs/week) Select number of week courses and start date

Week	1	2	3	4	5	6	7	8
21/06								
28/06								
05/07								
12/07								
19/07								
26/07								
02/08								
09/08								

### Select Airport Pick Up

- No pick up  
 Airport pick up  
 Airport pick up and drop off

Arrival date (dd/mm/yy): \_\_\_\_\_

Time: \_\_\_\_\_ AM  PM

Airport: \_\_\_\_\_

Airline: \_\_\_\_\_

Flying from: \_\_\_\_\_

Flight Number: \_\_\_\_\_

### Medical Insurance

Do you want a medical insurance?  Yes  No

Arrival date (dd/mm/yy): \_\_\_\_\_

Departure date (dd/mm/yy): \_\_\_\_\_

Number of days: \_\_\_\_\_

### Select Accommodation

- No Accommodation  
 Homestay 2 meals per day  
 Homestay 3 meals per day  
 Residence no meals

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, please describe: \_\_\_\_\_

Are you a vegetarian?  Yes  No

Do you take any medications?  Yes  No

If yes, please describe: \_\_\_\_\_

Do you like children?  Yes  No

Do you like pets?  Yes  No

Would you like staying with a smoker?  Yes  No

Describe your hobbies and interests:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

