

Please complete this form clearly in ENGLISH if possible.

**BOOKING FORM**

For **ADULT ENGLISH COURSES (Daytime)** Only

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| PERSONAL INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Family Name | | | |  | | | | | | | | | | | | | | | | First Name | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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| Birthday  (dd/mm/yy) | | |  | | | | | | | | | Phone No. | | | |  | | | | | | | | | | | | | | | Email | | | | |  | | | | | | | | | | | |
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| Home Country Address | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Gender | | | |  | | |
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| Nationality | | |  | | | | | | | | | Passport Number | | | | | |  | | | | | | | | | | | | | | | | | | | | Expiration Date:  (dd/mm/yy) | | | | | |  | | | |
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| Do you have any special needs or medical conditions? | | | | | | | | | | | | | | | | | | | | | |  | | Yes | | | | | | | | |  | | No | | *(If yes, please write the details below)* | | | | | | | | | | |
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| **CONTACT PERSON In Case of Emergency***(if possible, someone who can speak English)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | | |  | | | | | | | | | | | | | | | | | Email | | | | | | | | | | |  | | | | | | | | | | | | | |  | |
| Relationship | | | |  | | | | | | | | | | | | | | | | | Phone No. | | | | | | | | | | |  | | | | | | | | | | | | | |
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| How did you **first** learn about PACIFIC TREE? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | Family/Friends | | | |  | | | Website | | | |  | | Brochure/Leaflet | | | | | | | | | |  | | | Social Media | | | | | | | | | | | |  | Newspaper/Magazine | | | | | | | |
| N | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| COURSE INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Course Name | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Start Date (dd/mm/yy) | | | | |  | | | | | | | | | | | | | | Number of Weeks | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | |
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| What do you think your  language level is? | | | | | | | |  | |  | Beginner | | | | |  | Elementary | | | | | | | | | |  | | Pre-intermediate | | | | | | | | | | | | |  | Intermediate | | | | |
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|  | |  | Upper Intermediate | | | | | | | | | | | | | | | |  | | Advanced | | | | | | | | | | | | |  |  | | | | |
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| BOOKING INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | What do you want us to book for you? | | | | | | | | **Accommodation Details**(*Please mark your preference*.) | | | | | | |  | | | | | | | |  | | | | | | |  |  | Course Only | | |  | Course and Accommodation | | |  |  | Single Room |  | Twin Room | |  |  |  | | |  |  | | |  |  | Triple Room |  | Quad Room | |  | | | | | | | | |  | | | | | | Do you want us to pick you up at the airport? | | | | | | | | | **Flight details** | | | | | |  | | | | | | | | | | | | | | |  |  | Yes |  | No | | |  | | Arrival Date :  Arrival Time: AM or PM :  Flight Number : | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| STUDENT AGREEMENT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I declare that the information given is correct and accurate. I declare that I have read and understood the TERMS AND CONDITIONS of Pacific Tree International Language Academy. I agree to abide by the school’s policies and procedures. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| NAME OF THE STUDENT/APPLICANT | | | | | | | | | | | | | | | DATE OF SUBMISSION  (dd/mm/yy) | | | | | | | | |  | | | | | | | above declaration. | | | | | | | | | | | | | | | | | |
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