

Application Form

Please ensure both sides are complete

Basil Paterson College, 66 Queen Street,
Edinburgh EH2 4NA, UK

T +44 131 225 3802
info@basilpaterson.co.uk www.basilpaterson.co.uk

For Young Learner bookings please ensure that all sections are completed prior to arrival. We will be unable to accept the student to the programme without these.

PLEASE PRINT IN BLOCK LETTERS

1. Personal Details

Family name First name(s)
Date of birth (dd/mm/yyyy) / / Sex M F
Nationality Mother Tongue
Address

City Postcode Country
Tel (home) Tel (work)
Have you attended a Basil Paterson College course before Yes No
If yes, which school (adults/young learners) and year(s):

2. Emergency Contact

Emergency Contact: Name in BLOCK CAPITALS

Relation to the student English spoken?
Tel (home) Tel (mobile)

*Please indicate the country code

3. Course Details

Course name
Course Start date / / Course Finishing date / /
English language level Elementary (A1) Pre-intermediate (A2) Intermediate (B1)
 Upper-Intermediate (B2) Advanced (C1) Proficient (C2)

*A1-C2 Common European Framework level descriptors

4(a) Accommodation (Adults)

Arrival date / / Departure date / /
Arrival transfer from Edinburgh airport Departure transfer from Edinburgh airport
Accommodation: Homestay En-suite Homestay
Do you smoke? Yes No Would you prefer non-smoking accommodation? Yes No
No accommodation required Please provide your contact address in Edinburgh:

Special requests

4(b) Accommodation (Young Learners 13-17)

Accommodation: Edinburgh Residence Edinburgh Homestay No accommodation required
Arrival date / / Departure date / /
Arrival transfer from Edinburgh airport Departure transfer from Edinburgh airport

*Please send ticket details as soon as they are available

Application Form

CONTINUED FROM PREVIOUS PAGE

5. Health

Please list any medical condition, special diet or allergies that school staff should be aware of:

Please give details of any medical treatments that need to be followed during your stay:

Young Learners only:

Previous illness: Chickenpox Measles German Measles Mumps

Is the student asthmatic?

6. Authorisation (Young Learners)

Daytime

No child under the age of 16 is allowed out unsupervised.

Students who are 13 years old and above have supervised free time in Edinburgh on Friday afternoons.

Evening (16-17 Only)

I agree for my child to go out unsupervised in the evenings until 22.00 hrs

OR

My child is not allowed out unsupervised in the evenings

Sports

Sports not permitted

In the event of an emergency I authorise any responsible member of your organisation to give permission for an operation to be performed upon the participant if so advised by qualified medical staff.

Name of Parents or Guardians

Signature (Mother/Father/Guardian)

7. Payment Details

Course Fees of £ Course Deposit of £300

Method of Payment Bank Transfer Credit Card

Please debit my: Mastercard Visa Other

Credit Card No.

Expiry Date MM/YY CCV (3 digits on the reverse of the card)

Card Holder

Signature of Card Holder

8. Confirmation

I agree to the use of my/my child's personal information, including health and religious or dietary requirements, set out in the terms and conditions. Yes No

I agree that you can send me occasional information about Basil Paterson College courses and services. Yes No

I confirm my acceptance of the Basil Paterson College Conditions of Enrolment.

Signature Date (dd/mm/yyyy)

Signature of parent or guardian if student is under 18 years old

I heard about Basil Paterson College