



## 2021 SUMMER SCHOOL ENROLMENT FORM

(Please print clearly in CAPITAL LETTERS)

Office use only

### ABOUT YOU

Family name

First name

Male

Female

Date of birth

Day / Month / Year

Citizenship

Your own language

Your home address (include post/zip code)

Country

Telephone

Fax

Email

How did you hear about Magnifico Travel?

### YOUR CHOICE

Location centre

Start date

End date

Number of weeks

Course name

Accommodation

Allergies or Medical conditions?

Yes

No

If yes, please explain

In case of medical emergencies I authorise Magnifico Travel Ltd to take appropriate action and I understand that I am responsible for all medical bills incurred.

Yes

No

**UNMR Assistance £ 110 Return: please indicate if student will need Assistance as an unaccompanied minor.**



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### AIRPORT TRANSFER

Airport transfer services (see our separate fees list) Both ways  not required

Arrival date: \_\_\_\_\_ Dep. time \_\_\_\_\_ Dep. airport \_\_\_\_\_

flight n° : \_\_\_\_\_ arrival time: \_\_\_\_\_ arrival airport: \_\_\_\_\_

Departures date: \_\_\_\_\_ Dep. time \_\_\_\_\_ Dep. airport \_\_\_\_\_

flight n° : \_\_\_\_\_ arrival time: \_\_\_\_\_ arrival airport: \_\_\_\_\_

### BANK DETAILS FOR PAYMENT:

Account name: Magnifico Travel Ltd

Account number 40959928

Bank sort code: 20-92-60

Bank name: Barclays Bank

To be completed by all applicants - your agreement and signature:

I have received and understood the terms and conditions outlined in the relevant Magnifico Travel Ltd brochure and condition of enrolment documentation, including the cancellation and refund policy.

Signature of applicant

I have read and understood the relevant schedule of costs set out in the current Magnifico Travel Ltd price list and hereby confirm that I have sufficient funds to pay for all tuition costs as well as the costs of all food, accommodation and all other personal expenses during the full period of my course at Magnifico Travel Ltd.

Signature of parent or guardian

I authorise Magnifico Travel Ltd to take appropriate action in the event of a medical emergency and I understand that I am responsible for all medical bills incurred.

I declare that all above information is accurate and complete.

If the applicant is under 18, a parent or guardian shall agree to all Magnifico Travel Ltd conditions and is required to sign this form and to guarantee the necessary funds for the applicant.

Relationship to applicant