

APPLICATION FORM (2 pages)

You							
Your family name:			Your	our first name:			
Date of birth (DD/MM/YYYY):			Are y	e you: Male 🗌 Female 🗖			
Your nationality:			Pass	Passport No. (Optional):			
Your Home Address:							
Contact telephone number: Email address:	Country Code: Number (including area code):						
Do you smoke?	Yes						
Please let us know if you have any allergies, health or dietary needs and if you have any preferences concerning your accommodation:							
Your Parents or Guardian							
If you are under 18 years of age, please ask a parent or legal guardian to complete this section and to sign this application.							
Family name: First name:							
Relationship to applicant:							
Contact details for your parent during the							
period you will be at Studio Camb different from those above)							
Telephone number:							
Email:							
Payment You may pay (A) All the feet new or (B) 5200 new and the remainder feur weeks before your course start date.							
You may pay A) All the fees now or B) £300 now and the remainder four weeks before your course start date. Please indicate your choice here A) all fees now B) part payment now							
Method of payment - Please tick your preferred method of payment:							
□ On-line □ Bank transfer							
☐ Cheque				Credit card (please refer to the Dates and Prices leaflet)			
Intensive English Languag	e Cour	ses for students age	d 16	+			
☐ EFL 20 English Course							
☐ EFL 28 Intensive English Cou		Afternoon option (if known					
CAM 28 - University of Cambridge Examination Course for FCE CAE CAE							
IELTS 28 - IELTS Examination Course							
Start date (DD/MM/YYYY):				Total weeks:			
End date (DD/MM/YYYY): Arrival Total weeks:						weeks.	
Do you want us to arrange a taxi transfer on arrival/departure? Tick the appropriate boxes:							
☐ Arrival Airport (if known): ☐ Departure Airport (if known):							
Accommodation							
Do you wish us to arrange accomi	modation	in Cambridge?		☐ Yes	Т	No	
If yes:							
☐ Homestay Three Star ★★★							
☐ Homestay Four Star ★★★				Add £40 per week to the Three Star price			
☐ Homestay Five Star ★★★★				Add £140 per week to the Three Star price			
Residential accommodation - please specify residence and room preference:							
Your fees							
A - Registration Fee	£ 70.00)	Tota	l Fees (A+B+C) =		£	
B - Tuition	£			Ontional cumplements			
C - Accommodation	£		Differe	ifferent accommodation and/or airport transfers £			
			Tota	l amount to be paid -		t	

Summer and Winter Camps (Please tick the relevant boxes - some courses offer additional choices)							
Sir Henry at Hockerill Anglo-European College, Bishop's Stortford		Residential					
Sir Edward at the King's School, Ely		Residential					
Sir Richard at Leighton Park School, Reading		Residential Dance Football Mixed					
Sir Michael at Studio Main School, Cambridge		Residential					
Sir Laurence at Cambridge University, Cambridge		Residential Intensive					
Sir William at Richmond, the American International University in London		Residential Standard Intensive					
Sir Christopher at Ridley Hall, Cambridge		Residential on-campus Residential off-campus					
Sir John at Salisbury Villas, Cambridge		Residential Intensive					
Sir George at Studio School, Cambridge		Homestay Intensive					
Course Duration							
Start date (Sunday) (DD/MM/YYYY):							
End date (Sunday) (DD/MM/YYYY):		Total weeks:					
Arrival and departure		·					
Do you wish us to meet you on arrival at London's Heathrow or Stansted airports and return you to the airport at the end of your course? (The cost is included) Yes No If yes, please send us your flight details at least 7 days before you arrive.							
Your fees							
All inclusive fees:		Total: £					
By signing this agreement form I confirm: 1. that I understand, and agree with, the Terms and Conditions as set out on page 5 of the Dates and Fees leaflet. 2. that I am the applicant (if aged 18 or more years) or the applicant's parent or legal guardian (if the applicant is under 18 years of age); 3. that the applicant is in good health and does not suffer from any physical, mental or nervous illness, except as detailed in a separate letter enclosed with this application; 4. that I am responsible for paying the fees for the applicant's course.							
Name: (Please print)							
Signature:							
Place: (City)							
Date: (DD/MM/YYYY)							
		Agent:					
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