

Booking Form

Junior Summer Residential Programme 2021

Please complete this form in CAPITALS and send with a deposit of €200. This form must be completed and signed by a parent.

Student Details

Family Name: _____ First Names: _____

Date of Birth: _____ Male Female Student's Mobile Number _____

Nationality: _____ First Language: _____

If you are applying for a visa, please send us a copy of your visa to bookings@gpse.ie

Programme

I wish to book

- Multi-Activity Programme Intensive English Programme English & Rock School English & Rugby
 English & Celtic FC Soccer Academy English & Soccer Academy English & Tennis English & Basketball
 English & Volleyball English & GAA (Irish Sports)

Number of Weeks: _____

Arrival Date (Saturday/Sunday): _____ Departure Date (Saturday): _____

Estimated Level of English: A1-Beginner A2-Elementary B1-Intermediate B2-Upper Intermediate C1-Advanced

Parent/Guardian Details (emergency contact number)

Name: _____ Relationship to Child _____

Address: _____

Email: _____ Mobile Number: _____

Medical Information

Students are accepted on their chosen programme on the understanding that they are in good health. If we are not told in advance of a physical or medical condition we reserve the right to exclude students from the programme. Please answer all questions below.

Enter your European Health Insurance Card Number (EU students only) _____

**Please make sure your child travels with his/her European Health Insurance card*

Does your child take any regular medication which he/she will bring with him/her? Yes No

If yes, please give details: _____

Does your child suffer from any serious illnesses, allergies or behavioural problems?

(e.g. asthma, diabetes, nut allergy, panic attacks etc.) Yes No

If yes, please give details: _____

In the case of minor pain or illness, such as headaches, mild cold or sore throat, do you agree to your child being given non-prescription medication such as paracetamol, cough medicine, throat pastilles, anti-histamines, travel sickness tablets? Yes No

If no, please explain your reason: _____

In case of a medical emergency, every effort will be made to contact you, the child's parents/guardians, as quickly as possible. If your child needs an emergency operation, do you give permission to the Course director to sign the consent form? Yes No

Does your child have any allergy? Yes No Does your child eat meat? Yes No Does your child eat fish? Yes No

Any additional information regarding the above? _____

Is there any other information we need to ensure the health and well-being of your child? Yes No This information will be treated as confidential. If yes, please give details: _____

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Transfer Arrangements

All students must be accompanied to and from the campus upon arrival and departure. Proof of transfer arrangements is required for visa applications.

My child requires a standard a **STANDARD TRANSFER** (Gormanston Park staff will be at the airport to meet their flight and can sign an unaccompanied minor form for airline if required, but will not travel in the car to/from the campus): Single **OR** Return from Dublin Airport

My child requires a **CHAPERONED TRANSFER** (your child will be accompanied by Gormanston Park staff at all times, including in the car to/from the campus) Single **OR** Return from Dublin Airport

No transfer required. On arrival my child is travelling with or being met by an adult of 21 or over who will bring him/her to the campus at (time) _____ on (date) _____. Accompanying Adult Name: _____
Contact Number: _____ Relationship to Student: _____

No transfer required. On departure my child will be picked up from the campus by an adult of 21 at (time) _____ on (date) _____. Accompanying Adult Name: _____
Contact Number: _____ Relationship to Student: _____

Flight Details

Arrival Date: _____ Landing Time: _____ Departure Date: _____ Take off time: _____

Flight Number: _____ Flight Number: _____

Departing From: _____ Departing From: _____

Arriving at: _____ Terminal: _____

Terminal: _____ Arriving at: _____

Is your child registered with the airline as an unaccompanied minor? Yes No

Is your child travelling with another student? Yes No If yes, please give their name: _____

Payment

Students who need to apply for a visa are required to pay the fees in full at the time of booking.

Students who do not need a visa to study must pay the deposit of €200 and the remaining fees 4 weeks before arrival.

Payment amount: €200 deposit Payment in full € _____

Payment by International Bank Transfer

Our bank details are:

Gormanston Park School of English, Allied Irish Banks, Dame Street, Dublin 2, Ireland

Bank Account Number: 73100183 **Bank Sort Code:** 93-20-86

IBAN Number: IE18AIBK93208673100183 **BIC Number:** AIBKIE2D

Gormanston Park School of English is not responsible for your bank charges. Please send a copy of the bank transfer with your enrolment form. Please make sure that the student's name appear clearly in the bank transfer.

Payment by Credit Card

Contact our bookings team on bookings@gpse.ie or +353 1 690 4021 to pay by credit card over the phone.

Declaration – must be completed by a parent

I confirm that the above details are correct and complete. I have read and understand the Junior Summer Residential Programme terms and conditions and agree to the terms and conditions.

Full name in capital letters _____ Relationship to student _____

Signature _____ Date _____