## **APPLICATION FORM – Teenage Summer program**



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Name of agency (if applicable)	:			Tel: +33 450 79 08 38
Student information				
Family name :		Male 🗌	Female	
First name :				
Address:				
City:		.Postcode:	Country	
Email :		<b>Telephone</b> (with co	ountry code):	
Nationality:		.Passport number (if under 18)	:	Exp date:
Date of birth :	Age:	Height:	School y	ear:
Contact Information (Pa	arents/Guardian information t	for under 18s) Please	enter phone numbers with th	ne country codes
Mother's name :		Father's name:		
Occupation :		Occupation :		
Home number :		Home number : .		
Mobile number:		. Mobile number:		
Email :		. Email :		
Your course				
Please book me on the follo	wing course :			
Teenage Summer Program	weeks	from	. to	€ 1895
				+ € 950 per additional week
Option +				Supplement
Mountain Biking	weeks	from	. to	+ € 195 per week
(3 afternoons/week)				
Adventure Options to be chosen by our guides:	weeks	from	. to	+ € 150 per week
Canyoning, Via Ferrata, adventure par climbing, mountain biking, summer- sledging (subject to availability)	rk,			
French Private classes	weeks	from	. to	+ € 135 per week
(3 x 45mn per week)				
My level is				
☐ Complete beginner (A1.1 – A1.2) ☐ Elemen		A1.3 - A2.2)		
☐ Low Intermediate (A2.3 – B	1.2) High Interme	ediate (B1.3 - B2.3)		
☐ Advanced (C1.1 – C2.3)				

Airport transfers				
Please give us the following details	for your flight :			
Arrival date :	Arrival time :		. Flight number :	
Departure date :	Departure time :		. Flight number :	
Unaccompanied minor service booked	I ? Outbound Yes□ No□	]		
	Inbound Yes No	]		
Course summary/Payment				
Teenage Summer program	weeks		€	
Option +	weeks of option		€	
•	weeks of option		€	
		n	€	
TOTAL	•		€	
☐ I have enclosed a euro cheque for	€	Please find my credit card	d details below :	
☐ I have sent a bank transfer as a dep	posit for €	Name of cardholder:		
Our bank details		Type of card:		
IBAN: FR76 1810 6000 4696 7362 56	66 260	Card number :		
CODE BIC/SWIFT: AGRIFRPP881		Expiry date:		
Account Name: Alpine French School		Cryptogram :(last 3 digits on back of the card)		
		Amount to pay:		
· · · · · · · · · · · · · · · · · · ·	of of payment by ema	il. Bank charges to be	paid by the client.	
Declaration				
I wish to enrol my child at Alpine Frenc	h School and I enclose thi	is application form with pay	ment (or proof of payment) for the	
sum of €I	will pay the remaining bala	ance 4 weeks prior to the s	start of the course. I accept the	
general conditions regarding cancellati	on and refund of courses.			
	a [	Data :		
I have read and agree with the Student <sup>7</sup>	ferms and Conditions. L	Jate :		
N	_			
Name :	8	Signature:		

Student Medical Form			
Name of student :	First name :		
Date of arrival :			Number of weeks :
Course:			Age :
Height (in cm):			Weight (in kg) :
Emergency contact name :			Emergency contact no :
It is vital for the welfare	of the	student	that Alpine French School has an emergency contact number
Medical Requirements			
Does the student suffer from any o	f the fol	lowing (p	please give further details when appropriate)
Condition	Yes	No	Details and actions to take
Asthma			
Anorexia / Bulimia			
Epilepsy			
Physical disability			
Behavioural difficulties			
Allergies			
Other conditions			
Additional info:			
Dietary Requirements			
Does the student suffer from any o	f the foll	lowing (p	please give further details when appropriate)
Condition	Yes	No	Details and actions to take
Diabetes			
Vegetarian			
Vegan			
Coeliac – gluten-free			
Nut allergy			
Dairy allergy			
Religious dietary requirements			
Other			
A delite and the first			
Additional into:			
In the unlikely event that my child s	should re	equire m	edical attention, I allow Alpine French School to: administer First Aid and
minor medication (paracetamol, ba sign medical consent forms on my	_		by child to the appropriate medical services if necessary (doctor, hospital),
Sign modical consont forms of fifty	SOLIGIT (	νιιοισ αμ	propriate.
Name :			Date : Signature :

## School rules

## To be enrolled on the Alpine French School Teenage Summer Program, the student agrees to the following rules.

- Upon arrival, all valuables such as passport, flight tickets, medical insurance etc is to be given to the AFS staff who will keep it safe until needed or until departure.
- Mobile phones will be handed to the staff every morning and given back in the evening.
- The student must respect all parties, such as staff, the administration team, other students and local people. Failure to do so could result in disciplinary action and in extreme cases could cause the student to be expelled.
- The student must respect the premises. Failure to do so could result in disciplinary action and in extreme cases could cause the student to be expelled.
- Alpine French School operates a zero tolerance policy for under-age drinking and smoking or illegal drug use. This will result in disciplinary action and could cause the student to be expelled.
- If for any reason, Alpine French School decides to expel the student for gross misconduct, parents must be aware that they will be responsible for any extra costs incurred (such as change of flights, airport transfers...)
- The student should accept the french meals provided by the centre. Food is of a good standard and no alternatives will be provided
- The student is to attend classes, activities, meals, excursions and meetings on time
- The student is to comply with all safety instructions.

Parental permission (Please sign and scan this direct to us or via your agent)					
Name of the student :					
Course:					
Starting date:					
Name of parent/ guardian :					
Contact tel no :					
Email:					
I have read the notes and information on the course as well as the conditions relating to students under 18 and I authorise my son / daughter to participate to the course under these conditions.					
I have provided full information about any special medical and dietary needs and agree I will take responsibility for any misconduct that may occur during the course except for special dietary requirements.					
I authorise Alpine French School to take and use photographs and/or digital images of my children for use in news releases and/or promotional materials such as our small brochures and photos on our website. Names and other personal information will never be diffused and images will never be released to any person or company outside of Alpine French School.					
Name & signature Parent / Guardian  Name & signature student					