



Intensive School of English

ENROLMENT FORM

Personal details

Family name First name

Date of birth Male Female Nationality

Address in your country

Telephone Number E-mail

Passport Number Place of Birth

Emergency contact name Emergency phone

Do you have any allergies or Disabilities?

Course Details

General English Yes No English Express (afternoons only) Yes No

Cambridge Exam courses PET FCE CAE Business English IELTS

Starting Date Finishing Date

Hours per week 6 9 15 18 21 24 30 Other

Number of week 2 3 4 6 8 12 16 24 36 44 48 Other

Accommodation required? Yes No

Single room Shared Room En suite Half-Board Bed & Breakfast Self-Catering

Arrival & Departure details

Date of arrival Arrival time Flight N° Date of departure

Name of Airport Heathrow Gatwick Stansted Luton London City

Airport terminal **Heathrow** 1 2 3 4 5 **Gatwick** North South

Do you want ISE to organise an Airport taxi service? Yes No

Method of Payment

Debit / Credit Card ISE Website Bank Transefer Agent

Card Number Start Date / CVV

Expiry Date / IssueN°

Signature: _____ Date: _____

Acceptance

I accept the conditions of booking as stated in the brochure and enclose payment of **£150 deposit (minimum) / full fees of £**_____ (please delete as applicable) or proof of payment of this sum. I confirm payment of outstanding fees will be made 2 weeks before the course commences unless otherwise agreed by ISE.

Please complete this form and send to ISE.