

ENROLMENT FORM



Innisfree International College & Convention Centre

An Oasis for Reflective Inspiration

Lough Gill, Sligo, Republic of Ireland

Tel: +353 7191 19911/7191 72100 Fax: +353 7191 46130 Email: info@iiccc.info Web: www.iiccc.info

PERSONAL DETAILS

Surname or Family Name

First Name:

Gender F M

Date of Birth:

Address:

Tel:

Fax:

Email:

Nationality:

Native Language:

Occupation:

Passport no:

Please attach
photograph
(3 x photographs)

COURSE DETAILS

Course Type:

Course Code:

Start Date:

Finish Date:

Number of Weeks

For how many years have you studied English?:

CURRENT LEVEL OF ENGLISH (Tick one)

Advanced:

Intermediate:

Elementary:

Beginner:

ACCOMMODATION/CATERING - ON CAMPUS

Do you require FAMILY accommodation?:

Start Date:

Number of Weeks:

Finish Date:

Extra Nights:

Allergies?:

Do you smoke?:

Any special requests (children/diet etc):

Are you travelling with someone with whom you would like to share accommodation?:

Y N

OFF CAMPUS ACCOMMODATION (Tick one)

Residence:

Bed & Breakfast:

Hotel:

No Accommodation:

Give Details

Catering on campus (tick requirement):

full-catering

self-catering

breakfast only

TRAVEL ARRANGEMENTS

Date of Arrival in Ireland:

Time:

Date of Departure:

Do you require airport transfer?:

On arrival:

Flight Number and arrival time:

On departure:

Flight Number and departure time:

N.B. Students under 18 years of age must book both transfers. Adult students arriving or departing between 11.30pm and 6.30am are requested to take a Taxi.

AGENT NAME:

How did you hear about the IIC&CC?

Payment to be made to IIC&CC:

EURO €

Signature:

Date:

PRINT NAME: ()