



Viale Bruno Buozzi, 19, A1, int. 3
 00197 Roma - ITALIA
 Tel. : 06 80 69 21 30 - Fax 06 80 66 67 85
 E-mail : info@euroma.info euroma@mclink.it
<http://euroma.info>
 Codice fiscale : 97393200585
 C.C.I.A.A. ROMA 1121624

ENROLMENT FORM

HOW TO ENROLL: Please complete this form and send it together with TWO passport photographs to our agent in your area or directly to the academy.

Personal enrolment form

(Please print all answers below)

Name: Mr/Mrs/Miss..... First Name:.....
 Address:..... CAP :.....
 City:..... Country:.....
 Telephone Number: Home..... Mother Tongue:.....
 Nationality:..... E-mail:.....
 Date of Birth:..... Mobile:.....
 Passport Number:..... Country of Birth:.....

Course Details

Course commencement date..... Course termination date.....
 Choice of Course..... Number of Weeks.....
 How many years have you been studying English? Years.....Months.....
 Level of English: Beginner () Elementary () Intermediate () Advanced () Please tick

Accommodation Details

Single Room : () Double Room : ()
 Do you have any medical conditions for which you are taking medication?.....
 Do you smoke?..... Do you like animals?.....
 Do you have any dietary requirements?.....
 Will you have a vehicle whilst in England?..... Do you have any allergies?.....
 Arrival date..... Departure date.....

Before signing this enrolment form I confirm I have read the prospectus and agree to abide by the rules of the Academy. You should be aware that information about your enrolment, attendance and progress at this establishment may be passed to the Immigration and Nationality Directorate of the Home Office for purposes connected with Immigration. Please note that Academy does not take responsibility for the supervision of students under 18 out of lessons or scheduled activities.

SIGNATURE..... Date.....
 (Parent or Guardian if student under 18 years old)
 Next of kin 24 hour telephone contact details.....
 First Extension from.....to..... Signed.....
 Second Extension from.....to..... Signed.....

OFFICE USE ONLY

Family Name Number..... Class/Level.....
 Family Telephone..... First Change.....
 Second Change.....

