

ADULT BOOKING FORM

Personal Details (Please write in BLOCK CAPITALS)

FIRST NAME: _____ **DATE OF BIRTH** _____
(day/month/year)

SURNAME: _____ **SEX:** Male Female Non-binary

PASSPORT/National ID Card no.: _____ **NATIONALITY:** _____
(Please scan or photocopy your passport/ID card and send us a copy with your application form. We are required to check that you are lawfully studying in the UK)

You will be required to show your passport or ID card when you arrive at school.)

Have you had 2 Covid vaccinations? If so, when was your last vaccination? _____

E-MAIL ADDRESS: _____@_____

POSTAL ADDRESS: _____

City & postcode: _____

Country: _____

Home Telephone no.: code: _____ number: _____

Mobile Telephone no.: code: _____ number: _____

Who do we contact in an emergency? Name/relationship _____

Home Telephone no.: code: _____ number: _____

Mobile Telephone no.: code: _____ number: _____

Do they speak English? Yes **No**

For your safety and welfare, please tell us if you have any medical conditions or special diets? (e.g. Diabetic, gluten allergy, lactose allergy, epilepsy, ADHD, allergies, a disability, hard of hearing, blind etc).

Education & Work

Have you had any English tuition after school or taken any English exams?

If so, please comment: _____

Are you interested in taking an exam whilst you are studying with us? _____

Native language: _____ **Other languages spoken:** _____

What level of English do you think you have?

Proficiency Advanced Upper Intermediate
 Intermediate Pre-intermediate Elementary

What is your current occupation? _____

