

## Application Form for Summer Language Course in Seefeld

Please fill in the form in block letters!

Surname: \_\_\_\_\_ First name: \_\_\_\_\_

Boy  Girl Date of birth: \_\_\_\_\_ Nationality: \_\_\_\_\_

Religion: \_\_\_\_\_ Native language: \_\_\_\_\_

Date of entry (Mondays): \_\_\_\_\_ Date of departure (Saturdays): \_\_\_\_\_

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### Selected language (one main language course must be chosen):

The main language course meets for 3–5 lessons daily.

German  English  French  
Level:  Beginner  Intermediate  Advanced

### Optional additional private lessons available in the following subjects (can also be finalized on arrival):

German: \_\_\_\_ per week  English: \_\_\_\_ per week  French: \_\_\_\_ per week Additional subjects on request

### Choice of additional sports:

Tennis  Tennis lesson(s): \_\_\_\_ per week  Horseback riding: \_\_\_\_ per week  
 Golf: \_\_\_\_ per week

### Compulsory accident insurance:

My child requires accident insurance for the duration of the summer course  
 Copy of valid accident insurance policy attached

**Laundry required:**  yes  no

**Airport transfers:**  Yes (flight details can be given later)

### How did you learn about our school?

Agency  Friends  Internet  Advertisement  I've been an ARIANA student before

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Surname and first name of parent(s): \_\_\_\_\_

Profession: \_\_\_\_\_ Street: \_\_\_\_\_

Zip Code, City: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**The weekly course fee is CHF 1 540.–.** Bookings are made in the order in which applications are received. A deposit of CHF 1 000.– must accompany this application. It will be credited to the final account.

On the basis of the prospectus, the General Terms of Contract and Travelling (GTCT) and the house rules of Ariana AG, all of which are integral parts of the contract, the undersigned hereby enrolls the above mentioned student for the summer course in Seefeld. The contract is subject to Swiss law. Court of jurisdiction is St. Gallen. The attendance of classes is compulsory. Fees are to be paid 30 days before the beginning of a course.

**Signature of the parental authority:** \_\_\_\_\_

Please turn over.

## State of Health

Fitness for sports:  yes

no: \_\_\_\_\_

\_\_\_\_\_

Swimmer

Non-swimmer

Allergies: \_\_\_\_\_

Long-term prescribed medication: \_\_\_\_\_

Tetanus vaccination:  yes Date: \_\_\_\_\_  no

Other important information about student's health: \_\_\_\_\_

\_\_\_\_\_

Place and date: \_\_\_\_\_

**Signature of parental authority:** \_\_\_\_\_

## Deposit

The deposit amount will be credited to the final account at the end of the course. The final invoice will be given to the student. In case of a credit, please choose among the following refund possibilities:

- Credit amount can be given back to the student in cash on the departure day
- Credit amount must be sent by bank transfer to the following account:

Name & address of beneficiary: \_\_\_\_\_

Name of bank: \_\_\_\_\_

IBAN: \_\_\_\_\_

Swift: \_\_\_\_\_ Clearing no.: \_\_\_\_\_

- Credit amount must be transferred to the agency

All bank charges are at the expense of the beneficiary. If the information about how to return the credit amount is missing, it will be given back to the student in cash. If there is a balance exceeding the deposit paid, the final invoice will be given to the student and must be paid promptly.

Place and date: \_\_\_\_\_

**Signature of parental authority:** \_\_\_\_\_

**Please enclose 2 passport photographs.**

### Bank details:

Payments in Swiss Francs (CHF). Other currencies will be converted according to the exchange rate of the day.

Please specify the student's surname and first name.

Beneficiary: ARIANA AG, Höhenweg 60, 9000 St. Gallen/Switzerland, Bank: CREDIT SUISSE, 8070 Zurich/Switzerland, IBAN: CH85 0483 5044 7759 9100 0; Swift: CRESCHZZ80A; Clearing number: 4835