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Registration form

Personal details:

Family Name: _____ First Name(s): _____

Nationality: _____ Age: _____ Date of Birth: _____

Address in your country: _____

Telephone in your country: _____ Email: _____

Mobile Telephone: _____ Passport Number: _____

Emergency Contact Name: Mr Denis Smetanin

Relationship (eg mother): Agent Telephone: 07968 338859, den@celticlife.co.uk

How did you hear about us? Celtic Life Limited

Course details:

Type of course (eg. General English): _____

Number of lessons per week: _____

Course Dates: From _____ to _____ Number of Weeks: _____

Level of English: _____

Other languages spoken: _____

Travel details (If Known):

Arrival: Airport/port _____ Date: _____ Time: _____ Flight No: _____

Departure: Airport/port _____ Date: _____ Time: _____ Flight No: _____

Do you require a Taxi transfer to Torquay?: YES / NO

Do you need coach information? YES / NO

Accommodation:

Type of Accommodation required:(eg Homestay- single room)

Do you smoke? YES / NO Do you have any allergies or illnesses: _____

Do you have any special diets (e.g. vegetarian)? _____

Any other special requirements about your course or accommodation?

I agree to the booking conditions on the website (downloads page), and will pay all course fees due.

Any false or incomplete information may mean an increase in the cost of the services provided.

If under 18, a parent or legal guardian should sign this form. We will also issue a separate parental consent form.

Signed: _____

Date: _____

Name: _____