

# REGISTRATION FORM

Please write in CAPITALS



## PERSONAL DETAILS

Family name: \_\_\_\_\_

First name(s): \_\_\_\_\_

Sex: Male  Female

Date of Birth: DD/MM/YYYY \_\_\_\_\_

Age at start of course: \_\_\_\_\_

Nationality: \_\_\_\_\_

Mother Tongue: \_\_\_\_\_

Passport number and expiry date: \_\_\_\_\_

## HOME ADDRESS (all correspondence will be sent here)

House name/number: \_\_\_\_\_ Street: \_\_\_\_\_

Town: \_\_\_\_\_ Postcode: \_\_\_\_\_

Country: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

## WHO CAN WE CONTACT IN AN EMERGENCY?

Name: \_\_\_\_\_ Relation to student: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

## HOW DID YOU HEAR ABOUT INSPIRE?

Family  Friend  Agent  Teacher  Internet

Other  - Please give details

## MEDICAL & DIETARY INFORMATION

Do you have a medical condition or disability?: Yes  No

Do you have any allergies (e.g. food stuff, medicines or animals)?: Yes  No

Do you have any special dietary requirements?: Yes  No

If you answered 'Yes' to any of these questions please give details:

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BRADFIELD COLLEGE FOR 10-18 YEAR OLDS:



## COURSES & DATES:

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### GLOBAL CITIZENS & FOCUS CHOICE COURSES

2 Week Courses £2950	04 Jul 20 - 17 Jul 20	<input type="checkbox"/>
	19 Jul 20 - 01 Aug 20	<input type="checkbox"/>
	02 Aug 20 - 15 Aug 20	<input type="checkbox"/>
3 Week Courses £3950	04 Jul 20 - 24 Jul 20	<input type="checkbox"/>
	11 Jul 20 - 01 Aug 20	<input type="checkbox"/>
	17 Jul 20 - 10 Aug 20	<input type="checkbox"/>
4 Week Courses £4950	04 Jul 20 - 01 Aug 20	<input type="checkbox"/>
	11 Jul 20 - 10 Aug 20	<input type="checkbox"/>

### AFTERNOON FOCUS CHOICES

(Please choose one option)

British Multi sports	<input type="checkbox"/>
Creative Arts	<input type="checkbox"/>
Active Leadership	<input type="checkbox"/>
LTA tennis coaching +£150/week	<input type="checkbox"/>
PGA Golf tuition +£150/week	<input type="checkbox"/>
Horse Riding +£300/week	<input type="checkbox"/>

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**INTRO TO MEDICINE**

**INTRO TO LAW**

**INTRO TO COMPUTER SCIENCE**

2 Week Courses £3300	04 Jul 20 - 17 Jul 20	<input type="checkbox"/>
	19 Jul 20 - 01 Aug 20	<input type="checkbox"/>
3 Week Courses £4100	04 Jul 20 - 24 Jul 20	<input type="checkbox"/>
	11 Jul 20 - 01 Aug 20	<input type="checkbox"/>
4 Week Courses £5150	04 Jul 20 - 01 Aug 20	<input type="checkbox"/>

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## PERMISSIONS

### Medical Permission:

I give permission in an emergency, for a member of Inspire staff to authorise medical treatment and/or anaesthetic for my child.

Yes

No

### Activities Permission:

I give permission for my child to take part in all activities associated with Inspire.

Yes

No

### Photographs Permission:

I give permission for photographs of my child to be used in marketing material for Inspire.

Yes

No



### Unsupervised outing permission

Students 14 years and older will have the opportunity, on trips and visits, to go out in small unsupervised groups (minimum 3 students per group).

Yes

No

## PAYMENT

Full payment must be sent with this registration form to guarantee your place. Please choose from a payment option below.

### Method of payment

#### • CREDIT CARD

VISA  Mastercard

I wish to pay £

Card number:

Expiry date:  /

Security code:

Name of cardholder: \_\_\_\_\_

Address of cardholder: \_\_\_\_\_

Signature of cardholder: \_\_\_\_\_

#### • BANK TRANSFER

I wish to pay by bank transfer and enclose a copy of the bank transfer papers.

## CONFIRMATION

I agree to the use of my child's personal information, including health and religious or dietary requirements, as in the terms and conditions.

Yes

No

I agree that you can send me occasional information about Inspire.

Yes

No

Please sign below to confirm that you accept the Terms and Conditions of this booking as on the Inspire website, and that the student will comply with Inspire rules and regulations. (This confirmation must be signed to guarantee a place on a course).

Signature: \_\_\_\_\_

Date: \_\_\_\_\_