



# ENGLISH CENTRE

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## APPLICATION FORM TO GO TO WATERFORD IRELAND

PHOTO

First name: \_\_\_\_\_ Surname: \_\_\_\_\_ Male  Female

Address: \_\_\_\_\_

Town: \_\_\_\_\_ Post Code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Others \_\_\_\_\_

Email: \_\_\_\_\_ D.N.I. \_\_\_\_\_ Age: \_\_\_\_\_

Date of birth : DD \_\_\_\_\_ MM \_\_\_\_\_ yy \_\_\_\_\_

Nationality: \_\_\_\_\_ Native Language: \_\_\_\_\_

Knowledge of English:  Not Known  Elementary  Intermediate  Advanced

How did you hear about ENGLISH CENTRE? \_\_\_\_\_

I wish to register for a course for  2 weeks  3 weeks  4 weeks

Arrival details day \_\_\_\_\_ Flight n° \_\_\_\_\_

Departure details day \_\_\_\_\_ Flight n° \_\_\_\_\_

Accommodation:

- Residence  
 Family  with a friend  with other nationality  Only you.

Please indicate any allergies or medical particulars: \_\_\_\_\_

Are you vegetarian? \_\_\_\_\_

Do you like animals in the family? Yes \_\_\_\_\_ No \_\_\_\_\_ I don't mind \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_