

# **ENROLMENT FORM**

# English Courses 2018

PERSONAL DETAILS		
Title (Mr, Mrs, Miss, etc.):	First name:	
Family name:	Date of birth:	
Nationality:	Passport:	
First language:	E-mail:	
Address:	City:	Country:
Mobile:	Whatsapp:	
Emergency contact:	Mobile:	
Mother's name:		
How did you hear ES Dubai?  O Google O Facebook O Instagram O Friend O Agency O Other?  What is your current level of English?  O Beginner O Elementary O Pre Intermediate O Intermediate O Upper Intermediate O Advanced  Will you apply for a Student Visa? O Yes O No If yes, please attach a copy of your passport and a recent picture.		
Starting date:	Total study weeks:	
1. Course name:	No. of weeks:	Lessons per week:
2. Course name:	No. of weeks:	Lessons per week:
ACCOMMODATION  Do you require accommodation? O Yes O No Do you require a bedding pack? O Yes O No  Preferred accommodation in Uninest Student Residence: O Single en-suite room O Twin en-suite room		
AIRPORT TRANSFER		
Do you require airport transfer? O Yes O No	On departure? O Yes	O No

### **HOW WOULD YOU LIKE TO PAY?**

### O By bank transfer

Account name: ES Training DMCC Account N°: 019100124947 (USD) IBAN: AE700330000019100124947

Branch: DIC Branch Swift Code: BOMLAEAD Mashreq Bank, Dubai, UAE

PO Box: 336269

## O I enclose a cheque/draft

### **AGREEMENT STATEMENT**

- **1.** Have read and understood the ES Training DMCC terms and conditions, including the cancellation and refund policy. **www.esdubai.com/terms-and-conditions**
- 2. I have read and understood the relevant schedule of costs set out in the current ES price lists and hereby affirm that I have sufficient funds to pay for all tuition costs as well as the cost of all food, accommodation and all other personal expenses during the full period of my course at ES Dubai.
- **3.** I authorise ES Training DMCC to take appropriate action in the event of a medical emergency and I understand that I am responsible for all medical bills incurred.
- 4. I certify that all the information given by me in this enrolment form is accurate and complete.

Signature of applicant / Print name:	Date:

### **REGIONAL MANAGERS**

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