



# LINGUAVIVA

EDUCATIONAL GROUP

## APPLICATION FORM

Please complete this form and send it to the Admission Office

Bitte senden Sie dieses Anmeldeformular an:  
 GET Global Education Tumulka GmbH  
 Münchner Freiheit 22, 80802 München  
 Tel. +49 (0) 89 - 4142454 - 0  
 Fax: +49 (0) 89 - 4142454 - 22  
 E-Mail: info@get-education.com

### PERSONAL DETAILS

Family Name \_\_\_\_\_ First Name \_\_\_\_\_  M  F

Date and place of birth \_\_\_\_\_

Home address \_\_\_\_\_

Private Tel. \_\_\_\_\_ Office Tel. \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_ Nationality \_\_\_\_\_

Mother tongue \_\_\_\_\_ Profession \_\_\_\_\_

Name of emergency contact \_\_\_\_\_

Tel. \_\_\_\_\_ E-mail \_\_\_\_\_ Fax \_\_\_\_\_

### LOCATION

Please state the location of the school you wish to attend:

FLORENCE       MILAN       LIGNANO - Summer school for Juniors

### COURSE OPTION

Please state the Course/s you wish to attend:*				Payment details
_____	Starting date	N° of weeks	Tuition Fee	
_____	Starting date	N° of weeks	Tuition Fee	
_____	Starting date	N° of weeks	Tuition Fee	
_____	Starting date	N° of weeks	Tuition Fee	
				Total Tuition Fees
				Deposit
				Registration Fee
				€ 80
				<b>Total payment enclosed</b>

\* For Arts Programme please state one of the following courses:  
*Interior Design, Fashion, Photography and Painting*

\* For One-to-One courses please state the number of lessons per week.

### Knowledge of Italian

none       some       average       good       very good

### How did you hear about the school?

### TRANSFER SERVICE

Please check your arrival location, prices are one way per person:

**FLORENCE**       Florence airport      € 55

**MILAN**       Malpensa airport      € 125

Linate airport      € 70

Please check your arrival location, prices are round trip per person:

**LIGNANO**       Venice airport      € 160

Trieste airport      € 160

Treviso airport      € 200

Latisana railway station      € 75

Please fill in the section below:

	date	time	flight N°	Airline	from
Arrival					
Departure					to



## ACCOMMODATION IN FLORENCE AND MILAN

If you have selected a Programme in **Florence or Milan**, please check your choice of accommodation:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> <b>Homestay</b>         | <input type="checkbox"/> Bed & Breakfast                | <input type="checkbox"/> <b>Shared flat</b>               |   |
|  | <input type="checkbox"/> Half board                     |   |   |
|  | <input type="checkbox"/> Use of the kitchen             |   |   |
| <input type="checkbox"/> <b>Independent flat</b> | <input type="checkbox"/> Studio                         | <input type="checkbox"/> <b>Student Residence (Milan)</b> | <input type="checkbox"/> Shared bathroom  |
|  | <input type="checkbox"/> Two rooms                      |   | <input type="checkbox"/> Private bathroom |
| <input type="checkbox"/> <b>Budget Hotel</b>     | <input type="checkbox"/> <b>Hotel</b> (Category _____ ) |   |   |
| <input type="checkbox"/> Single room             | <input type="checkbox"/> Twin room (with _____)         | <input type="checkbox"/> Smoker                           | <input type="checkbox"/> Non smoker       |

Please state if you suffer from any illnesses, allergies, dietary problems, if you take any medicine regularly and if you prefer not to have accommodation with pets.

### Credit card details as guarantee/deposit for accommodation

Please check your Credit Card  Eurocard/Mastercard  Visa

Credit Cardholder's Name

Credit Card Number

Security Code

Expiry Date

- We authorize the School to charge the amount of **€ 100** as guarantee/deposit for **homestay** and **shared flat**
- We authorize the School to charge the amount of **€ 300** as guarantee/deposit for **independent flat** (only for Milan)

Date

Credit Cardholder's Signature

## ACCOMMODATION IN LIGNANO

If you have selected the **Summer School for Juniors in Lignano**, this is a residential programme with full board accommodation

Please give the name of the friend you want to share the room with

Please state if you suffer from any illnesses, allergies, dietary problems, if you take any medicine regularly.

## PAYMENT

I have paid the amount of (see *Payment details* section above):

by means of:  International Bank Cheque  Credit Card  Bank Transfer (incl. transfer cost)

**Enclosed please find: • proof of payment • 2 passport sized photos**

I authorize the School to use my personal data in accordance with the current Italian law which foresees keeping this information in archival form.

I have read and I accept the **Terms and Conditions**.

Place/date

Signature (of the parents for minors)

