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SABIS[®]

Educational Summer Camp 2016
10th Anniversary

APPLICATION FORM

School use only: A R

R # _____

C # _____

A # _____

Name _____
(as shown on passport) (first name) (middle name or father's name) (grandfather's name) (family name)

Date of Birth _____ Gender _____
(Day) (Month) (Year)

Nationality _____ Passport # _____

First Parent/Guardian

Name _____ Relationship _____

Postal Address _____

Tel. Mobile _____ Fax _____
(country code) (phone number) (country code) (phone number)

Home _____ Office _____
(country code) (phone number) (country code) (phone number)

E-mail _____

Second Parent/Guardian

Name _____ Relationship _____

Postal Address _____

Tel. Mobile _____ Fax _____
(country code) (phone number) (country code) (phone number)

Home _____ Office _____
(country code) (phone number) (country code) (phone number)

E-mail _____

UK Guardian *(if applicable)*

Name _____ Relationship _____

Postal Address _____

Tel. Mobile _____ Fax _____
(country code) (phone number) (country code) (phone number)

Home _____ Office _____
(country code) (phone number) (country code) (phone number)

E-mail _____

Preferred mobile number to receive SMS _____

Current Academic Record

School _____ Country _____
Class _____ Result _____
(promoted/make-up/repeat)

Duration & Cost

- 2 weeks stay from Monday 18th of July to Friday 29th of July Cost: 2,300 Sterling Pounds
 4 weeks stay from Monday 18th of July to Friday 12th of August Cost: 3,750 Sterling Pounds

Activities

a. Non-chargeable activities

All students may freely participate in all non-chargeable activities; however, if there is a particular activity that you wish your child/ward to be actively engaged in, please indicate below:

(Kindly refer to the Summer School brochure for available activities. Please note that the availability of non-chargeable activities is not guaranteed but all efforts will be exerted to make them available.)

b. Chargeable activities (Please check those activities that you wish your child/ward to take part in. The total amount covering chargeable activities should be included later in your remittance.)

Music Lessons:

- | | |
|---------------------------------|---|
| <input type="checkbox"/> Piano | <input type="checkbox"/> Horseback Riding |
| <input type="checkbox"/> Guitar | <input type="checkbox"/> Tennis coaching |
| <input type="checkbox"/> Drums | |
| <input type="checkbox"/> Other | |

c. If you do not wish your child to participate in any high-risk activities, such as horseback riding or ice-skating, please specify the activities:

Pocket Money and Telephone Expenses *(should preferably be sent through the school):*

a. I wish my child to receive a weekly pocket money allowance of £ _____

Amount in words _____

b. My child's weekly telephone bill should not exceed £ _____

Amount in words _____

Subjects

Normally, students take one or two academic subjects during Summer School, choosing from English, Mathematics, Arabic, and French. Chemistry, Physics, Biology, and Economics may be offered, if required. List below, in order of preference, the subjects of interest.

1 _____ 2 _____

Please complete the following details fully (For all parts of this form, if you answer 'yes' please give details.)

Vaccination/Immunisation

Please indicate if your child has received the following vaccinations. **It is important to include the date.**

Vaccination	Y/N	Date
BCG (against TB)	_____	_____
Cholera	_____	_____
Diphtheria	_____	_____
MMR (Measles, Mumps & Rubella)	_____	_____
Polio	_____	_____
Small Pox	_____	_____
Tetanus	_____	_____
Typhoid	_____	_____
Whooping Cough	_____	_____
Yellow Fever	_____	_____
Other?	_____	_____

Is your child presently taking any forms of medication? Yes No

Does your child presently suffer from any medical problems? Yes No

Has your child previously suffered from any major medical problems? Yes No

Does your child suffer from any visual or hearing problems? Yes No

Does your child suffer from any allergies? Yes No

Please complete the following in BLOCK LETTERS, deleting where appropriate.

Medical Consent

As the legal guardian, I, _____ authorize/ do not authorize the administration of SABIS® International School UK, to make all the necessary arrangements should **he/she** (or my child) ever require an emergency operation.

Dental Consent

As the legal guardian, I, _____ wish _____
to obtain: (circle appropriate treatment)

- a. Emergency dental treatment.
- b. Any and all treatment required to provide proper dental care. **I understand that I will be charged for such treatment.**

Please complete all the below sections

VISAS

Does your child need a VISA to enter the UK? Yes No

(Please refer to section C in the GENERAL INFORMATION for details)

If you answered yes and once the registration deposit is paid, a letter will be sent to the British Consulate requesting a visa for your child. A copy of the letter will be faxed to you to be used as a reference at the Consulate and for your child to present to the immigration officer at the airport.

AIRPORT TRANSPORTATION

Do you wish your child to be picked up by the school at the airport? Yes No

If your answer is yes, please refer to sections D and J in the GENERAL INFORMATION sheet.

PHOTOGRAPHS

Pictures will be taken during the camp of students in the different activities. Sometimes these photos are published in SABIS® newsletter, yearbooks, and other publications.

Do we have your permission to use photos of your child for such publications? Yes No

UNIFORM

Children will be supplied with a special summer camp T-shirt, my child's size is: _____
(Please choose from the following XS, S, M, L, XL, 2XL using the same size of your child's local school T-shirt)

DISCIPLINE and RULES

Adhering to all SABIS® schools, a high level of discipline is maintained during the summer camp. Students must abide by the summer camp rules. For more information please review the summer camp student handbook available on the summer camp website.

REFUND POLICY

If, after registration, a student is unable to attend, the following refund scheme will apply:

If the administration is informed before 15th of May 2016, 50% of the fees will be refunded

If the administration is informed between 15th May 2016 and 15th June 2016, 25% of the fees will be refunded

If the administration is informed any time after 15th June 2016, there will be no refund

N.B: As registration is taking place in many locations, if within 48 hours, it is discovered that there are no spaces available, the full amount will be refunded.

WAIVER OF LIABILITY

I understand and acknowledge that certain school activities may entail an increased risk of injury. I hereby agree to have my child take part in such activities (Ice-skating as an example and not for any exclusive reason). I will not hold the school and its staff and representatives responsible for my child's participation in these activities. I also understand that the school recommends that students do not bring along expensive clothing items (Clothing, jewellery, electronics, etc...) as SABIS® is not responsible for lost or stolen items.

PARENT'S/GUARDIAN'S NAME _____

SIGNATURE _____ Date _____

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