



Larkhill Language Centre

15 St.Cuthberts Street, Bedford MK40 3JB, UK

+44 (0)1234 363413

www.larkhill-language.co.uk

APPLICATION FORM

Family name:	First name:
Title: Mr / Mrs / Miss / Ms / Dr /Other	Native language:
Date of birth:	Gender: Male / Female
Nationality:	Occupation:
Address in England:	
Telephone & Mobile:	
Email:	
Home address (if you usually live outside England)	
Telephone & Mobile:	
Email:	
How long have you been learning English?	
What is your level? Elementary (1) / Pre Intermediate (2) / Intermediate (3) / Upper Intermediate (4) / Advanced (5)	
How long would you like to attend? Start date: _____ Finish date: _____	
How many hours per week would you like to attend?	
Type of Visa (if applicable):	
How did you hear of Larkhill Language Centre?	

A non refundable administration fee of £20 is payable with this application form. Please note that your booking cannot be confirmed until we receive your administration fee and application form. If paying by cheque, please make it payable to 'Larkhill Ltd'. Please sign below to confirm that the details supplied are correct and that you agree to the conditions outlined below. Minimum age of attendance is 17. A parent or guardian should also sign the form if you are 17.

Signature of applicant: _____ Date: _____

Signature of parent or guardian if you are under 18: _____ Date: _____

Conditions

1. Please note that there is no reduction or refund for absence or holidays.
2. No fees are refundable once you have started the programme.
3. Larkhill Language Centre reserves the right to dismiss a participant for unsatisfactory conduct.
4. Larkhill Language Centre reserves the right to decide the best programme and for each participant.
5. Any damage caused by a participant to Larkhill Language Centre property must be paid by the participant, except at the discretion of the Director.

Office Use Only – Other info.