



I. GENERAL INFORMATION ABOUT THE STUDENT

First Name:				Last Name:				
Date of Birth:	Day	Month	Year	Age:		Sex:	Male	Female
Country:				City:				
Occupation:				If you are student, please the name of the Institution.				
Work Phone:				Home Phone:				
Spanish Level				E-mail Address:				

II. GENERAL INFORMATION ABOUT THE PARENTS

Mother	First and last name:	
Cell Ph:	Work Ph:	
E-mail address:		
Father	First and last name:	
Cell Ph:	Work Ph:	
E-mail address:		
Best Parent to Contact: Mother ___ Father ___		Note: All Program Information, Billing & Updates will be send by e-mail

III. INFORMATION ABOUT THE SPANISH LANGUAGE CAMP

Check the Spanish Language Camp in which you enroll (X)

	Camp Dates	Airport Arrive Date	Airport Departure Date	
Spanisn Language Camp 1	07th - 18th June	June 06th	June 19th	
Spanisn Language Camp 2	14th - 25th June	June 13th	June 26th	
Spanisn Language Camp 3	21st June - 02nd July	June 20th	July 03rd	
Spanisn Language Camp 4	28th June - 09th July	June 28th	July 10th	
Spanisn Language Camp 5	05th - 16th July	July 04th	July 17th	
Spanisn Language Camp 6	12th - 23th July	July 11th	July 24th	
Spanisn Language Camp 7	19th - 30th July	July 18th	July 31st	
Spanisn Language Camp 8	26th July - 06th August	July 25th	August 07th	
Spanisn Language Camp 9	02nd - 13th August	August 01st	August 14th	
Spanisn Language Camp 10	09th - 20th August	August 08th	August 21th	
Spanisn Language Camp 11	16th - 27th August	August 15th	August 28th	
Spanisn Language Camp 12	23th Aug - 03rd Sept	August 22th	Sept 07th	

IV. INFORMATION ABOUT THE TEACHER

Teacher name:	School name:
Phone:	E-mail:

V. OBSERVATIONS AND STUDENT'S SIGNATURE

Signature

Por EPIFANIASCHOOL