

Taupo Language & Outdoor Education Centre

111 Tuwharetoa Street, Taupo, NZ
Telephone +64-7-378-8881 / email english@tloec.co.nz / fax +64-7-378-2206

ENROLMENT FORM

PERSONAL DETAILS

(Please fill in the information in this section the same as in your passport)

(Where you see a please tick your preferred option.)

Title (circle one) Miss / Mrs / Ms / Mr

Family name

Given name

Nick-name

Date of birth /day /month /year

Are you male / female? Smoker / non smoker?

Home address

Home phone

Mobile phone

Email address

Nationality

First language

Occupation

Passport number

EMERGENCY CONTACT PERSON (name)

Telephone number / /

Country code / area code / phone number

Email

Relationship to you?

Do you have any allergies to food / animals / medication? If **YES**, please provide details -

Do you need to eat any special food – vegetarian / gluten free?

Do you have an injury / impairment / medical condition that could restrict you participating fully in either the English or activity programmes we offer? If **YES**, please advise details and medication -

If you need more room, please write on a separate sheet of paper and attach it to your enrolment form.

PROGRAMME DETAILS

Full Time English Part Time English

Pre-Secondary Programme

English + Activities Programme (5 activities/week)

Parent & Child Programme

English + Golf

IELTS

Cambridge FCE

COMBO*

(*Combo - please advise number weeks each programme, e.g. 2 + 2 = 4)

___ weeks Full Time + ___ weeks English + Activities = ___ total weeks)

Start date (Monday)

Finish date (Friday)

What do you think your English level is?

beginner / pre-intermediate / intermediate

advanced

How many years have you studied English?

What is your IELTS/TOEIC test score?

ACCOMMODATION

Yes, I would like TLOEC to arrange homestay accommodation with an NZ family.

Yes, I would prefer (if possible), an **EXECUTIVE HOMESTAY**. (Includes your own bathroom and wireless internet.)

I would like TLOEC to arrange furnished accommodation for my stay - house / apartment / hostel.

I do not need TLOEC to arrange my accommodation.

Date of first night

Date of final night

(Check-out day is the day after your final night)

Homestay requests (✓ as many as you like)

Younger children

Older couple

Children similar age to me

No children

Dogs OK

Dogs not OK

Cats OK

Cats not OK

Smokers not OK

Smokers OK

Similar aged adult homestay (students 18+)

Religious family (please state religion)

What sport & hobbies do you enjoy?

INTERNATIONAL FLIGHT DETAILS

Arrival date _____

Arrival flight number _____

Arrival flight time _____

Do you want the TLOEC shuttle driver to meet you at Auckland Airport and bring you to your Taupo homestay / accommodation? YES NO

Departure date _____

Departure flight number _____

Departure flight time _____

Do you want the TLOEC shuttle driver to take you to Auckland Airport in time for your departure?

YES NO

(Please note that the shuttle service goes to Auckland once per day. Sometimes you might have to wait at the airport to be collected, or you might have to depart from Taupo earlier than you planned.)

DOMESTIC ARRIVAL DETAILS

I am flying to Taupo

Arrival date _____

Flight number _____

Arrival time Taupo Airport _____

I am catching an INTERCITY Bus to Taupo

Arrival date _____

Arrival time Taupo bus station _____

Either a member of your homestay family or a TLOEC staff member will meet you at Taupo airport or bus station.

I am arriving in Taupo by another method my alternative transport is.....

STUDENTS AGED UNDER 18 YEARS

Mother's name _____

Father's name _____

Or Guardian's name _____

Home address _____

Home telephone _____

Mobile telephone _____

Mother's email address _____

Father's email address _____

AGENT DETAILS

Please write details if you are using an agent to assist with your enrolment.

Agent company name _____

Agent's name _____

Telephone number _____

How did you find out about this agent?

TRAVEL & MEDICAL INSURANCE

All students must have comprehensive medical and travel insurance during their stay in New Zealand.

I confirm that I have this insurance and will bring a copy on my first day.

I do not have this insurance. Please purchase it for me through Uni-Care insurance and add it to my invoice. www.uni-care.org.nz

OTHER INFORMATION

How did you hear about TLOEC?

Have you been to TLOEC before? YES NO

Has a member of your family been to TLOEC?
 YES NO If YES, what is their name?

ENROLMENT ACCEPTANCE

Please accept my enrolment at Taupo Language Centre.

All information I have provided is correct.

I have read and accepted the general school rules and agree to adhere to those rules.

I confirm that I will hold the correct medical and travel insurance for my stay in New Zealand.

I confirm that I am travelling on the correct visa for my stay in New Zealand.

Any extra expenses which may be incurred during my time at TLOEC and which TLOEC pays for will be repaid in full on my final day at TLOEC (i.e. doctors fees / extra activity expenses / telephone calls. All school fees are included on your invoice.)

Signed (student)

Signed (parent or guardian for students aged under 18 years)