

2020 Application

JANUARY YOUTH HOMESTAY PROGRAM -**ST. PETERSBURG, FLORIDA**

1 Tell us about yourself!



Name					
Family Name (as shown on passport)	First Name	Full Middle Name			
Gender O Male O Female Mailing Address					
Street Address					
City, State	Country	Postal Code			
Telephone (country and city code)	E-mail				
Date of Birth					
month/day/year	Country of Birth	Country of Citizenship			
Where did you get this application? (Please list referring agent)					
2 Host Family Preferences CHECK APPROPRIATE CIRCLE 1 would prefer to live with: O A dog A cat O Oth Do you have any allergies? O Yes O No Do you have any special medical needs? O Yes O No Do you have any dietary restrictions? O Yes O No If yes, please list:	JANUARY YOUTH HOMESTA January 5 - January 25th, 202 January 5 - January 25th, 202	0 in St. Petersburg, Florida Cervices nily with 16 weekly meals g the week; 3 meals during the weekends.) ation from Tampa International Airport*			
Name	Relationship	E-mail			
Home Telephone (country and city code)	Work Telephone	Cell Phone			
Please note any medical conditions of which ELS Language Centers should be aware.	International Airport. If you arriv airport transfers. Please contact edu. Please be sure to email you	ndtrip airport transfer is included at Tampa e at a different airport, an additional fee is required for your referring agent for further information or sp@els. r child's flight details as soon as possible to sp@els.edu. will provide airport pick up confirmation.			
Please note any medication and dosage you will be taking while studying with ELS Language Centers.		Please note if your child requires early arrival or late departure from the official camp start and end dates, n additional fee for housing and airport transfers is required. Please contact your referring agent for urther information or sp@els.edu.			
	If your child is traveling alone and they need to m want to consider the child escort service. Please le Minors Service.	ake a transfer or lay-over during the trip, you may t us know in advance if you are using Unaccompanied			

Cancellation and Refund Policy

TUITION AND FEES If ELS does not accept your application, ELS will refund you the application fee. If ELS accepts your application, and you cancel your enrollment, the fee will not be refunded. However, should you cancel, you may apply your application fee toward a new enrollment for up to 12 months after your initial scheduled start date. If you cancel your enrollment prior to the start of the session, ELS will refund all pre-paid tuition and fees (except the application fee, courier fee and housing deposit, if applicable). Student health plan fees are not refundable.

HOUSING FEES The \$300 per session housing deposit will be refunded if you cancel or defer with more than 28 days' written notice. If you cancel with fewer than 28 days' notice, ELS will retain up to a maximum of two sessions of housing deposits.

HOUSING REFUND POLICY Refund policies for housing vary by location and are determined by the Center's college/university or housing association.

ALL REFUNDS You must make your refund request in writing. Refunds will be made within 30 calendar days of your cancellation, withdrawal or termination from the program. Parental approval is required for all refunds to students under the age of 18 years of age. ELS follows all applicable state and federal regulations, including those related to student refunds.

TUITION REFUND POLICY If you withdraw during your program, you will be eligible for a prorated tuition refund. This refund will be calculated from your last recorded day of attendance and will be prorated by week. ELS counts any part of the week that you studied as a full week of attendance for refund calculations. There will be no refund after the second week of a three-week program. Accordingly, there will be no refunds issued after the third week of a four-week program.

Financial and Health Statement/Information Release

I understand that my expenses (excluding personal miscellaneous expenses) per session while studying at ELS Language Centers will be as indicated in the Application and Important Information addendum. I agree to accept full responsibility for these expenses. I have also read and understand the ELS cancellation and refund policy. I agree to accept full responsibility for my actions while participating in the Program and any related activities (including excursions and/or internships) and agree to assume all risk of harm arising from my participation, unless caused by ELS' negligence.

I hereby agree that ELS shall have the right, in its sole discretion, to terminate my attendance in any ELS program of study and to insist that I return to my country of origin within 24 hours of such termination by ELS. By his or her signature below, my parent or guardian agrees to insure that any minor under the age of 18 enrolled hereunder shall be returned to his or her country of origin within 24 hours of notification from ELS that the student's attendance in an ELS program has been terminated.

In case of illness and/or injury, permission is granted to any appropriate medical center to examine or treat and make necessary referrals to outside physicians as indicated. Permission is also granted to release information regarding my health to other designated individuals. I authorize ELS Language Centers to release information regarding my studies to my guardian or sponsoring agency. I further authorize ELS Language Centers to release my ELS academic records to any colleges or universities to which I apply.

I hereby grant ELS Language Centers and its subsidiaries, associated companies and licensees, permission to photograph, record and videotape me while attending ELS Language Centers or activities conducted by ELS Language Centers. I understand that ELS Language Centers will own the still photographs and/or video footage in which I appear, and have the unrestricted right to publish such photographs and use such video in any ELS Language Centers sales literature, on the ELS Language Centers Web site and in any other ELS Language Centers material, and shall have the right to license others to do the same. I further understand that this grant is intended to be worldwide in scope and to apply to all media now existing or hereafter developed.

I understand that ELS shall not release my information, except as described above, to anyone or any organization or entity, outside of its subsidiaries and associated companies and licensees, without my written consent.

×				
Signature of Applicant	Date			
X				
Signature of Parent or Guardian if Applicant is under 18	Date			

Signature of Parent or Guardian if Applicant is under 18

Program		Non-refundable Application Fee		Program Cost	Total
January Youth Homestay Program	3 weeks	USD \$180	USD \$300	USD \$3,615	USD \$4,095

Credit Card Authorization

OVISA OMastercard OAMEX ODiners OJCB



Credit Card Holder Name Relationship to Student Credit Card Number

Expiration Date

Signature

Validation Code (code located on back of VISA, MC, JCB or Diners and on the front of AMEX)

Amount authorized to be charged: \$ (includes application fee) **FREE Complimentary T-Shirt!**

O large

O extra large

(please indicate size)

O extra small O small O medium



Special Programs – USA

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For complete explanation of refund policies, refer to Section 6.