This form concerns:				
Student's name (to be completed)				
Date ob birth:				
Couse dates (start/end date)				
CONTACT INFORMATION OF PARENTS OR LEGAL GUARDIAN IN CASE OF EMERGENCY				
Name : First name :				
Adresse :				
Home phone number : Cell phone :				
Email:				
If unable to be reached, the following person should be contacted				
Name: First name:				
Relationship to your son/daughter:				
Home phone number : Cell phone :				
Email:				
□ We, the parents/legal guardians consent that our son/daughter will take part in a language course at the above mentioned dates and accept that it is an adult program without any supervision /mentoring at any time during his/her stay. We are aware of the fact and accept that neither the school, nor the hostfamily is responsible for the health, safety, damages or personal belongings of our son/daughter.				
MEDICAL ATTEST				
Which illnesses has your son/daughter had ?				
Whichillnesses your son/dauther especially prone to ?				
Does your son/daughter have any allergies ?				
Does your son/daughter take any medication ? If yes, please indicate details below				
Reason/illness Medication Treatment duration Frequency of dosage				
Is there an intolerance/allergy to any type of meddicine ?				
Are they any health related limis in regards to practice sports ?				

Attach photocopy of the vaccination record

		We, the parents/legal guardians agree that our son/daughter may be treated by a doctor in case of illness and may be brought to a hospital and undergo surgery in case of an emergency. We will be informed right away about any type f illness/accident of our child.		
CURFEW/ACCOMODATION				
		We, the parents/legal guardians, are aware of and accept that curfew rules apply at most schools which might differ from what our daughter/Son is used to. The student is fully responsible to comply with these regulations, which will be communicated by the school.		
		We the parents/legal guardians are aware of the following accommodation rules (for host families, resdidences and all other accommodation options) and have discussed these with our son/dauthger:		
	-	The house rules and requirements of the host family/accommodation need to be followed (this involves, amongst others, usage of the telephone, having visitors, vacation, usage of the TV and computer, etc)		
	-	If there are any problems/disagreements it is very important to discuss these with the host famiy and/or the school first.		
I		The host family always needs to be informed about absences during free time ,or if the student is late for dinner and comes home later in the evening.		
	-	The student are responsible to keep their accommodation clean and tidy.		
	-	The students are not allowed to welcome gess/acquaintances and have them sleep over without discussing it with their host/accommodation or the school first.		
	-	Smoking is not allowed inside the house/accommodation. Minors are note allowed to drink alcohol		
	-	The students are oblitated to act adequately and to avoid unnecessasry noise and/or disturbance.		
	-	The stutents are responsible for potential damages caused at the accommodation.		
		We are aware of and accept that the school has the right to expel our daughter/son from school or the accommodation any time and without any refund, especially for the following reasons (list may include other related offenses):		
		- Possession/consumption of drugs		
		 Consumption of alcohol Intentional damaging of property of the school or the host family/accomodation Frequent absences from class 		
		- Repeated infractions of the school's rules		
		Infraction of federal lawsHarassment/threatening of other students, staff or oneself		
		We are aware of, in case of an expulsion of our son/dauthger from school and/or the accommodation, we are solely responsible for the return or onward journey and he associated costs thereof.		
		We are aware that our son/daughter will not be able to join the excursions organized by the school out of the district		
		We confirm that our son/daughter has enough sense of responsibility and maturity to bel left alone at certain times and to travel outside of the activities offered by the school.		

We agree that our son/daughter may take part in the (optional) activity program and ecursions of the school (except the excursions outside the disctrict).
We agree that our son/daughter make take local public transportation to get to the school and accommodation.
We agree that our son/daughter may travel within the country.
We are aware that travel to the destination, visa as well as all other costs that may apply once there, are solely our responsibilities.
We accept responsibility to ensure that adequate insurance coverage for illness and accident of our Son /daughter is obtained (additionally recommended is an extra coverage for theft, cancellations, luggage, etc.) Important: an internationally recognized insurance card/voucher of health insurance needs to be brought With.
Date and signature of parents or legal guardians :
Please add a photocopy of the parents' passeports