



Oak Lane English Courses



The Old Rectory
Blaxhall
Woodbridge
Suffolk IP12 2DT

Tel +44 1728 688750 Fax +441728 688 019

APPLICATION FORM

Family Name: _____ First Name: _____

Date of Birth: _____ Nationality: _____ Male/Female: _____

Home Address: _____

Telephone No: _____ Fax No: _____ Email: _____

For how long has your child studied English?: _____

Level of spoken English: Beginner/Elementary/Intermediate/Advanced _____

Level of written English: Beginner/Elementary/Intermediate/Advanced _____

Course required: Holiday Course/Preparation for Boarding School Course/Intensive English Course/Exam Course _____

Please give details of any medical conditions/special dietary requirements: _____

Travel: Do you require escorted transfer on arrival? Yes/No
Do you require escorted transfer on departure? Yes/No
Are you travelling in a group of more than one? Yes/No If yes, how many: _____

Arrival: Date: _____ Time: _____ Flight No.: _____ Airport/Terminal: _____

Departure: Date: _____ Time: _____ Flight No.: _____ Airport/Terminal: _____

Name of parent responsible for payment: _____
(PLEASE PRINT NAME)

Signed: _____ Date: _____

Please print off this form, fill in all your details, and post to the address below;

Oak Lane English Courses, The Old Rectory, Blaxhall, Woodbridge, Suffolk, IP12 2DT, England

Or email the completed form to oaklaneenglish@blaxhall.com