



Enrolment Form

General Information Course Name: Course Dates: From: ______ To: _____ Sex: ____Male ___ Female Date of Birth: _____ Home Address: _____ Telephone Number: ______ ____ Fax Number: _____ Email Address: _____ Nationality: Contact Person in the event of an emergency Name: _____ Relationship: _____ Telephone Number: How did you learn about The Codrington Language Centre? School __ Internet __ Embassy __ Friend/Relative Other (Please specify):_____ **Travel Arrangements** Please arrange the meeting/transfer service to and from the Sir Grantley Adams International Airport in Barbados. ____ Yes ____ No Arrival Date: _____ Flight: _____ Departure Date: _____ Flight: _____ **Confirmation** I have read and understand the information regarding the enrollment procedure, payment requirements and cancellation policies.

Student's Signature Student's Name