

### Introduction

This declaration for young learner's is also available in German, French, Italian, Spanish and Russian.  
The English version is legally binding in all cases.

For your son/daughter's security and well-being, it is essential that this declaration is completed by the parent/guardian.  
**Please return it to reach Anglo-Continental not less than 10 days before the date of course commencement.**

Please affix passport photograph here with the student's name clearly written on the reverse.

(Please complete in BLOCK CAPITALS)

### Student data

Please mark

Name of student

Date of birth

Course number

Student's mobile number

Student reference number (if known)

### Emergency contact details (if different from Enrolment form)

In case of emergency you can contact:

Name of parent/guardian

Telephone

Mobile number

Email

Name of Agent  
(if appropriate)

Telephone

Email

### Parents arranging private accommodation

I shall be making my son/daughter's accommodation arrangements. I understand that the Anglo-Continental School for Young Learners will not be responsible for my son/daughter's safety and conduct when not involved in activities supervised by Anglo-Continental staff, and that I will be responsible for the arrangements for his/her daily journeys to and from the Centre. I understand that my son/daughter should be collected from the Centre by 16.30 hours, Monday to Friday. During June, July and August, dinner and evening activities are held at the centre on Tuesdays and Thursdays. My son/daughter shall be collected from the Centre at 20.00 hours on these days.

Signature of parent/guardian

Accommodation arrangements have been made with:

Name

Address

Telephone

Mobile number

### Medical/dietary information

In the event of serious accident or illness, the school will inform you immediately, and for this purpose it is essential that you notify the school of your emergency contact details during the period of your son/daughter's course as requested.

Please advise us if your son/daughter suffers from any illness, physical or learning disability, allergy or dietary problems, or if he/she has any special dietary requirements or needs to take medication regularly. If regular medication is necessary, please ensure that your son/daughter brings adequate supplies and a legible prescription, in English, from his/her doctor.

To avoid the risk of loss, medicines should be carried in hand-baggage, and not in luggage which is checked in for the flight. On arrival in Bournemouth, students should advise the Head of Centre and Homestay Family of all medicines or prescriptions they have brought with them.

Does your son/daughter suffer from any chronic or recurrent illness, allergy or dietary problem?

Yes  No

Does your son/daughter have to take any medication regularly?

Yes  No

Is your son/daughter incapacitated in any way?

Yes  No

Are there any restrictions on your son/daughter's fitness to take part in sports activities?

Yes  No

Does your son/daughter have any special dietary requirements? e.g. vegetarian, vegan, coeliac, gluten free, lactose free or serious nut allergy.

Yes  No

If you answer yes to any of the questions, please give full details.

### Sickness or accident

In the event of a serious accident or illness, the authority of the parent/guardian is required before emergency medical, surgical or dental treatment can be carried out. In case such permission cannot, for any reason, be obtained in the event of an emergency, as a precaution we strongly recommend that this authority is given to Anglo-Continental in advance on this declaration form to avoid any delay in arranging emergency treatment.

I hereby authorise the senior staff of the Anglo-Continental School for Young Learners to arrange emergency medical, surgical or dental treatment if necessary.

Signature of parent/guardian

Place

Date

### Travel details by air

Please attach a copy of the ticket and enter the booking reference number in the space below:

Will your son/daughter be travelling unaccompanied by an adult? If yes, the airport transfer and check-in service will automatically be supplied and invoiced.

Yes  No

### Any additional information

Please repeat the student's name as it appears on the declaration overleaf.

Name of student

### Transfer arrangements to accommodation on arrival

(See pages 24 and 25 of the Young Learners Prospectus)

My son/daughter will use the Airport Reception and Escorted Transfer by **ANGLO-CONTINENTAL COACH** departing from London Heathrow Airport (LHR) to Bournemouth.

This service runs at regular intervals on Sundays between 08.00 and 20.00 hours from 02 June to 11 August 2019.

Date of arrival	Time of arrival
Flight number	Airline
Airport of departure	
Airport of arrival	<b>London Heathrow (LHR)</b>

### Alternative transfer - any day, time or place

I wish to reserve a **CAR** transfer to accommodation.

Date of arrival	Time of arrival
Flight number	Airline
Airport or place of departure	
Airport or place of arrival	

### Transfer arrangements from accommodation on departure

(see pages 24 and 25 of the Young Learners Prospectus)

My son/daughter will use the Airport Reception and Escorted Transfer by **ANGLO-CONTINENTAL COACH** departing from Bournemouth to London Heathrow Airport (LHR).

This service runs at regular intervals on Sundays between 05.00 and 16.00 hours from 16 June to 25 August 2019. My son/daughter will allow 5 hours for travel, check-in and security procedures. I understand that if the flight departs before 10.00 hours or after 20.00 hours, I should reserve an Anglo-Continental car transfer.

I have made the following flight arrangements for my son/daughter's return journey at the end of the course:

Date of departure	Time of departure
Flight number	Airline
Airport of departure	<b>London Heathrow (LHR)</b>
Destination	

### Alternative transfer - any day, time or place

I wish the school to arrange a **CAR** transfer.

Date of departure	Time of departure
Flight number	Airline
Airport or place of departure	
Destination	

### Permission to go out without supervision

#### Age Group 14 - 16

Permission to go out without supervision may be requested for students aged 14 - 16.

I understand that it is compulsory for my son/daughter to attend the complete scheduled programme (lessons, excursions and activities). After completion of the programme my son/daughter must return to his/her homestay accommodation for the evening meal. After this my son/daughter may request permission to leave the homestay accommodation unaccompanied. I have explained to my son/daughter that he/she must return to the homestay accommodation not later than 22.00 hours.

Signature of parent/guardian

### No permission to go out without supervision

#### Age Group 10-13

Students under the age of 14 are not permitted to leave the Course Centre/Homestay Accommodation without supervision. I have instructed my son/daughter to this effect.

Signature of parent/guardian

### No permission to go out without supervision

#### Age Group 14-16

Although this age group may ask to go out without supervision, I do not wish my son/daughter to leave the Course Centre/Homestay Accommodation without supervision, and I have instructed my son/daughter to this effect.

Signature of parent/guardian

### Permission for a friend, relative or group leader to take out my son/daughter

#### Age Group 10-16

If there is a possibility that a relative or friend (aged 18 years or over) will wish to take out your son/daughter for a day or a weekend, it is essential that you fill in the name of the person or persons below. Without this written authority, your son/daughter will not be permitted to go out with any person not known to the School's staff or the Homestay Family. In such cases, the person concerned will be asked to prove his/her identity. e.g. with photographic identification such as a passport or ID card.

Mr / Mrs / Miss

Is authorised to take my son/daughter out at weekends or during free time by arrangement with the Head of Centre or Homestay Family, and will be responsible for his/her safety and conduct on these occasions.

Signature of parent/guardian

### Changes to permission

#### Age Group 14-16

If for any reason you wish to alter the original arrangement for your son/daughter to go out without supervision, we must receive a signed letter of authority from you for the change by post, fax or a scan attached to an email. Emails or verbal messages are not acceptable.

### Photography and Video Consent

I consent to Anglo-Continental taking photographs and videos of my son/daughter to promote the school through various channels such as social media, website, prospectuses, flyers, signage, exhibition displays and email marketing.

Please complete this declaration and send it to Anglo-Continental to arrive no later than 10 days before course commencement. Please keep a copy for your records.

### Anglo-Continental

29-35 Wimborne Road, Bournemouth BH2 6NA, England

**Telephone** (GB code) +(0)1202 55 74 14

**Fax** (GB code) +(0)1202 55 61 56

**Email** english@anglo-continental.com

**Website** www.anglo-continental.com