



Summer Programmes 2024
Integration 21st Century International Summer School
Croatia

Email to: applications@integraton21.hr
Apply online: www.integration21.hr
For advice call: +385 (23) 264 085

Important Information

- (1) If you fill out this form by hand, please write in printed CAPITAL LETTERS and use **black ink** only
- (2) Note: if you are under 18 years of age, the form must be signed by a parent or legal guardian
- (3) If you have any questions about your application please do not hesitate to call or email us

SUMMER SCHOOL COURSES FOR AGES 10-12

1.1 Your Dates

•Please choose when would you like to come:

05/08-11/08 11/08-18/08 18/08-25/08

1.2 Course Options

•For each week that you are studying with us, you should choose one Workshop option below:

	Week 1	Week 2	Week 3
<u>Workshops</u>			
•Academic English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
•Arts & Drama	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
•LEGO club. Advanced	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Visa Requirements

Our School is able to help its students obtain Visas to enter Croatia for their stay. If you require assistance please tick the box below and we will be in contact with you soon.

Visa Assistance Required

3. Transfer Details

Our School offers a transfer service from and to Split Airport Kastela/ Zadar Airport on Sundays For more information on transfers please follow links on Useful Information website page.

Transfer required

5. Included in your course fee

Accommodation, Full Morning/ Afternoon Tuition, Sport Activities, All Study Materials/ Equipment, Full Board, Full Day Supervision, Evening Indoor Social Events and Graduation, Airport Transfer

Student Information and Contact Details

1. STUDENT INFORMATION

Student First Name: _____

Student Family Name: _____

Date of Birth: ____ (DD) ____ (MM) ____ (YYYY)

Gender: M F Nationality: _____

Native Language: _____

Have you attended our Summer School Course before?

Yes No

Student Mobile Telephone Number: _____

Will this number be in use during the programme? Yes No

Medical Information and Requirements: _____

Dietary Information and Requirements: _____

2. CONTACT INFORMATION (Parent/ Legal Guardian) - These details will be used as the primary method of contact with you during application

Contact Person: _____ Relationship to Student: _____

Contact Email Address: _____

Contact Telephone Number 1: _____ Contact Telephone Number 2: _____

Home Address: _____

City: _____ Country: _____ Postcode: _____

3. EMERGENCY CONTACT INFORMATION (IF DIFFERENT FROM ABOVE) - To be used as an emergency contact during the course

Contact Person: _____ Relationship to Student: _____

Contact Email Address: _____

Contact Telephone Number 1: _____ Contact Telephone Number 2: _____

4. EDUCATION - Please give details of your current school or college

Name of School: _____ Address: _____

City: _____ Country: _____ Postcode: _____

5. PAYMENT

5.1 Payment Structure (tick one)

Option 1: Pay €850 deposit now, balance later

Option 2: Pay full fees now

Please note that full payment must reach us no later than 45 days before the start of the course

We would like to contact you with updates and information regarding other courses, products and services from Integration 21st Century. If you would prefer not to receive these updates, please tick the box on the left

I accept the Integration 21st Century's Terms & Conditions and Rules & Regulations for Summer Programmes and Privacy Policy (all of which you can find at <http://integration21.hr/en/terms-and-conditions>)

Student Signature: _____

Payment by Bank Transfer

Please transfer the payment into the following bank account:

IBAN: **HR3924840081103613170**

Bank Name: **Raiffeisen BANK Austria**

Bank Address: **Ulica bana Josipa Jelačića 1**

Zadar, Croatia

Account Name: **INTEGRACIJA XXI VIJEK**

Account Number: **1103613170**

Sort Code: **2484008**

Swift Code: **RZBHR2X**

****Please mark the payment with the name of the student****

Parent/Guardian Signature: _____