LILA* Booking Form



Personal Details							
First Name:							
Family Name:							
Date of Birth:							
Place of Birth							
Nationality:							
Gender:							
Address:							
City or Town:							
Zip Code:							
Country:							
Course Request							
Course Request Course Name:							
Course Name.							
Start Date:		C	ourse Len	gth:			Weeks
							VVCCRS
Accommodation Rec	uest						
Accommodation Type:							
Room Type:							
Start Date:					End Date:		
Start Date.					Liiu Date.	•	
Share Requests:							
Preferences: Please highlight / circle	На	Halal		Vegetarian		gan	Lactose
	Gluter	Gluten free		Kosher		ets	No pets
			1				
Airport Transfer Req	uest						
		NO		DATE		AIRPORT	
	YES	N	10	DA	ATE		AIRPORT
Arrival Transfer: Departure Transfer:		N	10	DA	ATE		AIRPORT



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Payment of Fees (Please select as appropriate)		Visas (Please select as appropriate)				
	I am a private paying student	I do not need a visa				
	I am a scholarship student	I am applying for an Electronic Travel Authorisation				
N	otes	I am applying for a Short-term study visa				
		I am applying for a Student visa				
		I already have a visa that allows me to study (please send a copy to LILA*)				
		I am applying for a different type of Visa				
		If applying for a different visa, please state what type here:				

 $\hfill \square$ I agree to the LILA* <u>Terms and Conditions</u>

