



REGISTRATION FORM

Your Personal Information

Last Name:	First Name:	
Date of Birth:	Country of Birth:	Nationality:
Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Native Language:	
Address:	City:	
County:	Zip Code:	Country:
Telephone (Home):	Cell.:	
E-mail:	Please, specify your e-mail again:	

Homestay with a Host Family (Individual bedroom)

Your Arrival Date (Month/Day/Year):	Time:
Flight Number (Final Destination):	Airline (Final Destination):
Your Departure Date (Month/Day/Year):	Time:
Medical Issues/Allergies: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please explain:
Do you smoke? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you eat the following: <input type="checkbox"/> Fish <input type="checkbox"/> Meat <input type="checkbox"/> Dairy Products <input type="checkbox"/> Eggs <input type="checkbox"/> Exclusively Kosher	
Your English Level: <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	

Person to Contact in Case of Emergency

First and Last Name:
Address:
Telephone (Please, give us more than one number):
E-mail:

Other Services Provided

Course(s): <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please specify which one(s):
Internship (s): <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please specify how many:
Airport-Family Transfer: <input type="checkbox"/> 1 transfer <input type="checkbox"/> Both transfers	If 1 transfer, please specify if at arrival or departure:

Fees

Registration & Administration Fees:	\$150
Security deposit:	\$250 (Refundable at the end of your stay)
Host Family Fees:	FROM \$280 <u>per week</u> (Breakfast & Dinner Included) or
Host Family Fees:	\$ <u>per week</u> (which includes <input type="checkbox"/> Breakfast <input type="checkbox"/> Dinner <input type="checkbox"/> Single Bedroom <input type="checkbox"/> Shared Bedroom)
Selected Course(s) Fees:	\$70 per course
Selected Internship(s) Fees:	to be determined
Airport-Family Transfer (Arrival/Departure):	<input type="checkbox"/> \$100 (1 transfer) or <input type="checkbox"/> \$190 (both transfers)
Total Fees:	\$

How did you hear about Family Elite?

Yahoo, Google Other, please specify _____ School, university, college Other, please specify _____

International Wire Transfer to Family Elite LLC

Family Elite Contact Information

JPMorgan Chase Bank
1550 Westwood Blvd, Los Angeles, CA 90024, USA
Account number: 119295630
Code Swift: CHASUS33

Family Elite LLC
9903 Santa Monica Boulevard, Suite 860
Beverly Hills, CA 90212, USA
E-mail: info@familyelite.com
Tel. 001 310 383-8859 or 001 310 948-2986

I declare that I have read, understood and agree to the Family Elite "Terms and Conditions" document.

Signature of the participant or of the parent/guardian if the participant is minor: _____

Date (Month/Day/Year) _____