



STUDENT CLUB APPLICATION FORM

MEMBER NUMBER

17700_____

Please indicate geographical location of where you intend to travel

| | | | | | | | |
|--------------------|--|----------|--|-------|--|---------------|--|
| International Tour | | Regional | | Local | | Local One Day | |
|--------------------|--|----------|--|-------|--|---------------|--|

Please Print In Capital Letters Or Tick Where Applicable

Parent/Guardian Details

| | | | | | |
|--------------|--|---------------|--|--------------------------|--|
| TITLE | | Date of Birth | | I.D No | |
| Surname | | | | Sex: | |
| First Names | | | | PROPOSED MONTHLY PREMIUM | |
| | | | | PAYMENT PERIOD | |
| Occupation | | | | MODE OF PAYMENT | |
| Home Address | | | | Due Date | |
| Contacts | | | | Relationship | |
| Email: | | | | Legal Guardianship? | |

Student Details :

Name of School:

| | | | | | |
|------------------|--|---------------|--|---------------------------|--|
| TITLE | | Date of Birth | | I.D No | |
| Surname | | | | Sex: | |
| First Names | | | | Clubs | |
| NATIONALITY | | | | Class | |
| CITIZENSHIP | | | | Enrolment Year | |
| Contacts | | | | Teacher Name | |
| Email: | | | | Major | |
| DESTINATION | | | | Relationship to Applicant | |
| Travel PERIOD | | | | Passport No. | |
| Travel Frequency | | | | Medical Aid | |

Please note that all payments are to be made to the following banking details;

Account Name: E-Com Pvt Ltd T/A Four Faces Holiday Clubs

Bank Details: **NMB ACC No. 280028517 Branch: Avondale**

Signed at _____ on the _____ Day of _____ 2016/17

Applicant Signature (Parent) _____