

## 2015 Registration Form

Designated Learning Institution Number

DLI# 019350421222

Type: New Student Student Number: 80 Agency: Cheng Sun

## Student Information

First Name : Hong Last Name : Ju

Gender: female Birth Date: Sep 29, 2015 Age: 33 Citizenship: Chinese

Address: 219 Dufferin Street Country: Canada

Telephone: 4165161944 Fax: Email: stiron88@gmail.com

Emergency Contact & Telephone: 32424 Home Country or Canada: Canada

## **Accommodation Information**

Accommodation Type Homestay / Residence (May - Aug. only)

Homestay options

Half Board(2 meals per day)

**Accommodation Datesr** 

Start Date: Sep 27, 2015 Finishing Date: Jan 27, 2016

Number of weeks: 17

Departure date from Toronto: Jan 30, 2016

**Arrival in Toronto** 

Airport Pick-up Requested Yes

Date: Oct 12, 2015

Time: 3:48 PM Airline&Flight: 223

Departure from Toronto

Airport Pick-up Requested No Date: Oct 12, 2015

Time: 3:48 PM Airline&Flight: 234

Please answer the following questions to assist us in finding an appropriate host family for you.

1. Do you smoke? No Do you have any special diet or food preferences? No

2. Can you live in a home with smokers? No If yes, please Describe:

3. Can you live with pets? Yes

Do you have any allergies or medical concerns? No 4. Can you live with small children?

If yes, please Describe:

5. What are your hobbies?

distsatsatsa

Profession (What is your occupation?)

stsat

Additional Comments:

Extra O	ptions	(please	note	that a	extra	charge	will	apply

Private Bathroom (Subject to availability)

I confirm that I have read and I	accpet the Conditions of Enr	olment as well as the refund	d policies of the English School of	of Canada as stated in the
registration package.	·			

Student Name: \_\_\_\_\_ Date \_\_\_\_\_