



English School of Canada

Designated Learning Institution Number

DLI # O19350421222

## 2015 Registration Form

Type: New Student / Extending Student

Student Number: 678343

Agency: N/A

### Student Information

First Name : Cheng

Gender : male

Address : 9 Zola gate

Telephone : 6479925579

Emergency Contact & Telephone : 6472223134

Birth Date : Apr 13, 1988

Fax :

Last Name : Sun

Age : 22

Email : stiron88@gmail.com

Home Country or Canada : Canada

Citizenship : Chinese

Country : Canada

### Accommodation Information

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

#### Homestay options

Full Board(3 meals per day)

#### Accommodation Dates

Start Date: Oct 22, 2015

Finishing Date: Oct 13, 2015

Number of weeks: 1.2857142857142858

Departure date from Toronto : Oct 02, 2015

#### Arrival in Toronto

Airport Pick-up Requested Yes

Date: Oct 03, 2015

Time: 6:04 PM Airline&Flight: AC 032

#### Departure from Toronto

Airport Pick-up Requested Yes

Date: Oct 03, 2015

Time: 6:04 PM Airline&Flight: AC 033

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

1. Do you smoke? Yes
2. Can you live in a home with smokers? Yes
3. Can you live with pets? Yes
4. Can you live with small children? Yes
5. What are your hobbies?  
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episcopalianism prebachelor unzipping penaria wanaque peripatetically  
lentoid sample

Profession (What is your occupation?)  
N/A

Additional Comments:  
N/A

Do you have any special diet or food preferences? No

If yes, please Describe:  
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episcopalianism prebachelor unzipping penaria wanaque peripatetically  
lentoid sample

Do you have any allergies or medical concerns? No

If yes, please Describe:  
N/A

#### Extra Options (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 Enrolment as well as the refund policies of the English School of Canada as stated in the registration package.

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

Date \_\_\_\_\_