



Photo

LOVELL INTERNATIONAL ACADEMY 2021 STUDENT REGISTRATION

Name (First and Last): _____

Name Used: _____ Boy Girl

Date of Birth: _____ Nationality: _____
(Day / Month / Year)

First Language: _____ Other Language: _____

Name of Parent: _____

Mailing Address: _____

Telephone Numbers: _____

Mobile Numbers: _____

Email Address: _____

2020/21 Academy Terms (Please circle)

11+ EXAM HOLIDAY PREPARATION COURSE: MONDAY DECEMBER 21 – FRIDAY JANUARY 8

*** Classes will not take place on Friday December 25th ***

Day Student Fees CHF 4,300

WINTER TERM: MONDAY JANUARY 11th to FRIDAY MARCH 26th

Day Fees CHF 15,900

This is to certify that I agree to the terms and conditions for Lovell International Winter Academy, and that if this application is accepted by Lovell International Winter Academy, I will pay the academy fees in accordance with the terms. I understand that no portion of the registration deposit will be refunded. I understand that the remainder of the fees will only be refunded if written notice indicating that the above-mentioned child will be unable to attend, is received by the academy on or before December 11th, 2020. I understand and agree that no reduction in fees or allowance will be made for my child's temporary absence, withdrawal or dismissal from the academy.

Date: _____

Signature: _____