

The Learning Traveller

YOUR LANGUAGE TRAVEL EXPERTS

www.learningtraveller.com



Application Package for the Florence Mature Teen Homestay Program

Thank you for booking your language immersion program through The Learning Traveller!

Prior to completing the application package please be sure both teens and parents have read through the information found on the following sections of The Learning Traveller website:

1. For Teens: www.learningtraveller.com/teenprograms_forteens.asp
2. For Parents: www.learningtraveller.com/teenprograms_forparents.asp

In order to get your program booking underway, please:

- 1) complete each page of the attached application and fax the documents to **+1 519 821 7490**
- 2) mail the original application (please keep a copy for your records) to:
The Learning Traveller Inc
Suite 201, 121 Wyndham Street North
Guelph, Ontario N1H 4E9 Canada

Be sure to include your non-refundable deposit check for **\$300 US/\$300 CDN** as well as a photo copy of the main page of your passport

PLEASE NOTE: YOU WILL NEED A VALID PASSPORT TO ENTER ITALY. IF YOU ARE AN AMERICAN OR CANADIAN CITIZEN YOU DO NOT NEED AN ENTRY VISA. IF YOU DO NOT HAVE A VALID PASSPORT PLEASE ENSURE YOU APPLY FOR A NEW ONE WELL IN ADVANCE OF YOUR PROGRAM START DATE. ALL TRAVEL DOCUMENT REQUIREMENTS ARE THE RESPONSIBILITY OF THE APPLICANT.

Booking Confirmation:

Once we receive your completed application package we will provide a booking confirmation (this can take up to 72 hours) as well as final payment instructions.

Travel Arrangements:

Upon receipt of your booking confirmation, you can make your travel arrangements. Please do not make any travel arrangements until you have received a booking confirmation from our office. Please arrange to arrive in Florence on a Sunday between 8:00 and 20:00 and depart on a Saturday between 8:00 and 20:00 (arrival or departure outside of these hours/days will result in extra costs and must be pre-approved by our office). Once you have your travel arrangements confirmed please provide us with the details by e-mail to info@learningtraveller.com.

Pre-departure Information:

Approximately one month prior to your course start date you will receive a comprehensive pre-departure package with information to help you prepare for your language immersion program.

CALL US TOLL-FREE ON 1 888 386 1411 IF YOU HAVE ANY QUESTIONS ABOUT THE APPLICATION PACKAGE OR PROCESS.

www.learningtraveller.com



Application Form for the Florence Mature Teen Homestay Program

Personal Information of Participant			
Last name:		First name:	
Nationality:		Native language:	
Date of birth: (mm/dd/yyyy)	Gender: M <input type="checkbox"/> F <input type="checkbox"/>	Current School:	Grade:
Passport number:		Country of issue:	
Email of participant:			
Home phone:		Cell phone:	
Street address:			
City:		State/Province:	
Country:		Zip/Postal code:	
Communication with other participants			
Can we share your first name, e-mail address and departure date with other program participants who might be interested in making contact before your program starts? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Parent/Guardian Contact Information			
Last name:		First name:	
Relationship to participant:		Daytime phone:	
Evening phone:		Cell:	
Emergency number:		Email of parent/guardian:	
Course Information			
Course name: Florence Mature Teen Homestay Program		Italian level:	
Optional Courses:			
Start date:		Finish date:	

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Accommodation and Meals

Accommodation options: single room double room*

You will receive 2 meals per day consisting of breakfast and dinner.

***Please note double rooms are only available to students travelling with a friend.**

Homestay Information

Please answer the following questions:

1. Do you mind if there are children in the homestay: yes no
2. Do you mind if there are animals (dogs, cats, birds): yes no
3. Do you mind if adults smoke in the homestay: yes no
4. Please list any other homestay preferences you have:

Please note: We will do our best to match your preferences however we ask that you have an open mind as wonderful host families come in all shapes and sizes and are located in a variety of settings.

Medical Information and Dietary Requirements/Preferences

It is essential that you declare any/all medical conditions and issues (including medication) as well as any/all dietary issues on the attached Medical Information and Dietary Requirements/Preferences Form. Failure to do so may result in you not receiving proper medical attention if an illness or medical emergency should arise (please attach additional pages if required).

Travel Details

Please wait until your booking has been confirmed by us before you make travel arrangements. You will be asked to e-mail us your travel details approximately 4 weeks before the course start date.

Airport Pickup and Drop off

An airport pick-up for Florence is included in the price of your program. Please indicate below only if you do not require this service.

I do not require an airport pick-up: I will also require an airport drop-off:

How did you hear about The Learning Traveller?

Terms and Conditions & Parental Authorization (required for all participants under 18)

By signing below, I acknowledge the following:

1. I have read and agree to The Learning Traveller Terms and Conditions found at www.learningtraveller.com/terms.asp
2. I authorize my child, named in this application, to participate in the selected program.

Name of parent or legal guardian:

Relationship to applicant:

Signature of parent or legal guardian:

Date:

Signature of student:

Date:

* In the event of a joint or shared custody arrangement, both parents must sign the application.



DECLARATION FOR MINORS

TO BE ISSUED, SIGNED BY THE PARENTS AND RETURNED WITH THE COMPLETED APPLICATION

We (*indicate full name*) _____, in our capacity

of parents (or having the parental authority on) of (*indicate full name of the student*)

_____ hereby take all legal and

financial responsibility for any and whatsoever action or behaviour of our

son/daughter (*again indicate*

full name of the student) during his/her stay in Italy which cause or contribute to cause any

harm or damage to any third party, and fully relieve the hosting family in Italy and

the school Linguaviva - Via Fiume 17, I -50123 Firenze - thereon.

Signed on this _____ day of _____

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Medical Information and Dietary Requirements/Preferences Form

NAME: _____ DATE OF ARRIVAL: __/__/____ AGE ON ARRIVAL: _____

EMERGENCY CONTACT TELEPHONE NUMBER DURING THE COURSE: _____

Do you suffer from any of the following?

▫Asthma: Yes/No

Details:

▫Allergies to food, animals or medicine: Yes/No

Details:

▫Anorexia or Bulimia: Yes/No

Details:

▫Epilepsy Yes/No

Details:

Do you need a special diet for religious or medical reasons?

Yes/No

Details:

Do you have a physical disability or condition that might affect your ability to fully participate in the program?

Yes/No

Details:

Are you vegetarian?

Yes/No

Are you on medication, and if so, must this be refrigerated?

Yes/No

Please give complete details (attach a separate sheet of paper if necessary).

I authorize school staff to administer first aid* where the care of a nurse or doctor is not considered necessary.

In the unlikely event that my child should require emergency treatment or surgery, I authorize school staff to sign the consent form on my behalf.

Signed:.....mother/father/guardian (please circle one)

Date:.....

*this includes only ordinary home remedies such as a band-aid for a cut finger or an aspirin for a headache. Depending on local laws, staff may be legally prevented from helping your child in this way without your written permission.



FLORENCE MATURE TEEN HOMESTAY PROGRAM Terms and Conditions for Homestay Accommodation

Linguaviva, the host school for the Florence Mature Teen Homestay Program, has specific terms and conditions for homestay accommodation bookings. We ask that you read the terms and conditions below and indicate your acceptance of them by signing and dating this form in the space provided.

BEFORE ARRIVAL

Change/Cancellation Fee - Linguaviva will charge a **100 €** non-refundable fee in the event of a:

- **change of booking**, if communicated less than 2 weeks prior to the arrival date
- **change of dates** for delayed arrival of 1 or more weeks, if communicated less than 2 weeks prior to the arrival date
- **cancellation of accommodation**, if communicated less than 2 weeks prior to the arrival date
- **non arrival** or no show in the reserved accommodation

AFTER ARRIVAL

Security Deposit - Upon arrival students must pay a deposit of **100 €** to the homestay. This is a security deposit and will be refunded at the end of the stay if no damage is caused and all keys are returned to the homestay.

LEAVING ACCOMMODATION EARLIER OR CHANGING ACCOMMODATION - Accommodation changes are allowed without financial penalty in extreme cases where issues that are affecting the well-being of the student or members of the host family are irresolvable. In all other cases, if a student elects to leave or change their accommodation before the end of the reserved and pre-paid period they must give the school 2 weeks notice. A request to be moved to a new host family within that two-week notice period may result in extra homestay fees being charged.

I have read the Terms and Conditions for Homestay Accommodation for the Florence Mature Teen Homestay Program and indicate my acceptance by signing below:

Name (please print): _____

Place _____ date : _____

Signature : _____



FLORENCE MATURE TEEN HOMESTAY PROGRAM Credit Card Details for Accommodation Guarantee/Deposit

Linguaviva, the host school for the Florence Mature Teen Homestay Program, requires students to pay a deposit of **100 €** to the homestay. This is a security deposit and will be refunded at the end of the stay if no damage is caused and all keys are returned to the homestay.

Linguaviva asks that this accommodation guarantee/deposit be paid by credit card prior to the student's arrival in Florence. Credit card authorization details are provided below.

I authorize Linguaviva to charge 100 Euros to the credit card indicated below. I understand that these charges will be refunded in full to my card if no damage is caused by my son/daughter and all keys are returned to the homestay. If any damage is caused at the homestay or if keys are lost by my son/daughter this may result in the forfeiture of some or all of the accommodation guarantee/deposit.

Name of the program participant:

Name of the cardholder:

Select credit card type: Visa MasterCard Discover

Card number:

Expiry (month/year):

Three digit security/CVC number (if applicable):

Date:

Signature :

If you have any questions or concerns about this form, please call 1 888 386 1411

Please fax this form to 1 519 821 7490