

## FOIRM IARRATAIS

Ainm • Name

Buachaill  Cailín

Seoladh • Address

Rphost na dTuismitheoirí • Email

Uimhir Gutháin • Phone

Dáta Breithe • Date of Birth

Scoil • School

Bliain nó Rang • Year or Class in School

Más rud é go raibh tú i gCoáiste Samhraidh cheana breac síos ainm an Choláiste agus na blianta • If you attended an Irish College before give college and years

Eolas faoi Shláinte • Relevant Medical History

### Mo Rogha Chúrsa • My Choice of Course

#### 3 Week Courses

Cúrsa A  6 June - 28 June Táille €900

Cúrsa B  30 June - 22 July Táille €900

#### 2 Week Courses

Cúrsa C  24 July - 08 Aug. Táille €750

Cúrsa C1  24 July - 08 Aug. Táille €750

Please enclose a Non-Refundable Deposit of €300

Total Paid

Return to: Comharchumann Chléire Teo.  
Oileán Chléire Co. Chorcaí.

Name and phone number of a person who will accept responsibility for the student in the parent's / guardian's absence.

Ainm • Name

Seoladh • Address

Home Tel.

Mobile

### Rialacha • Rules

1. I give my child permission to swim during the course under supervision by college staff (He/She should be able to swim 25 metres unaided).
2. I have read the college brochure and accept the rules of the college
3. I am happy to remain on the the course for the full duration of the course
4. Coláiste Pobail Chléire or host families accept no responsibility for loss of or damage to the property of any student.

Parents are required to give details of any illness for which medication or special diet is required. Any medical problems, which occur, are dealt with promptly. Please note that all medical expenses are the responsibility of the parent/ guardian. Parents are advised that it is in their interest to have Personal Accident Insurance. (If you have a current medical card send copy of same with application.)

Glacaim le rialacha an Choláiste •  
I accept the rules of the Coláiste

Siniú an Scoláire • Students signature

Siniú an Tuismitheora / Caomhnóra • Signature of Parent / Guardian

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