

Application for Adult courses @ GLS Campus Berlin

Please fax to +49 30 787 41 92 or send by email to: german@gls-berlin.de
or by mail to: GLS Sprachenzentrum Berlin, Kastanienallee 82, 10435 Berlin, Germany

First Name:	Family name:	<input type="checkbox"/> male	<input type="checkbox"/> female
Nationality:	Mother tongue:	Date of birth:	
Telephone:	Email:		
Fax:	Street:		
Postal code:	City:	Country:	
If you need a visa, how do you want documents sent: <input type="checkbox"/> by ordinary mail <input type="checkbox"/> by express mail (on surcharge)			
Only if you need a visa - your passport no.:		How did you find out about GLS?	

The German program you'd like to book

Your present level of German:	<input type="checkbox"/> Complete beginner	<input type="checkbox"/> Elementary	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Quite good	<input type="checkbox"/> Advanced
Course name:	Course dates from:	To:	No. of weeks:		
Do you want to add <input type="checkbox"/> Internship	Professional field:		No. of weeks:		
<input type="checkbox"/> University Pathway	What would you like to study:				
Insurance required <input type="checkbox"/> yes	<input type="checkbox"/> no				

Accommodation

<input type="checkbox"/> No accommodation required	Accommodation dates from:	to:			
<input type="checkbox"/> Apartments on GLS Campus	<input type="checkbox"/> Single room	<input type="checkbox"/> Shared double room			
<input type="checkbox"/> Hotel Oderberger on GLS Campus	<input type="checkbox"/> Classic room	<input type="checkbox"/> Rooftop Maisonette			
	<input type="checkbox"/> Tower studio				
<input type="checkbox"/> Flat share with international students	<input type="checkbox"/> Single room	<input type="checkbox"/> Shared double room			
<input type="checkbox"/> Low budget student residence					
<input type="checkbox"/> Homestay	<input type="checkbox"/> Self-Catering	<input type="checkbox"/> With breakfast	<input type="checkbox"/> Half board		
Do you mind if your host	<input type="checkbox"/> smokes	<input type="checkbox"/> has pets	<input type="checkbox"/> has children		
<input type="checkbox"/> Special dietary requirement:					

Transfer

<input type="checkbox"/> No transfer required	<input type="checkbox"/> On arrival	<input type="checkbox"/> On departure
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Price total

<input type="checkbox"/> I accept the GLS terms and conditions and pay by	<input type="checkbox"/> bank transfer	<input type="checkbox"/> credit card
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Bank transfer – please pay to: GLS Sprachenzentrum Berlin

SWIFT: HYVEDEMM, IBAN: DE16 1002 0890 0356 4128 85

Account no: 356412885

Bayerische Hypo- und Vereinsbank AG: bank code 100 208 90

Address: Leibnizstr. 100, D-10625 Berlin

Credit card - please indicate Visa Master Card American Express Diners Club

Name of cardholder:

Expiry date: Card No.:

Date Signature (for minors signature of parent or guardian)