

Académie Ste. Cécile International School: 2022 SHORT TERM PROGRAMME

925 Cousineau Rd., Windsor, Ontario CANADA Phone:(519) 969-1291 Fax: (519) 969-7953 E-mail: info@stececile.ca

Family Name: _____ First Name: _____ Middle Name: _____ Sex: ____

Home Address _____

City _____ Country _____ Postal Code _____ Passport # _____

Telephone _____ E-mail Address _____ Date of Birth: dd/mm/yy _____

Father's Name _____ Cell Phone _____ E-mail: _____

Mother's Name _____ Cell Phone _____ E-mail: _____

Mother Tongue _____ Other Languages: Spoken _____ Written: _____

Your English Language Level: ____ Beginner ____ Intermediate ____ Advanced ____ Scores TOEFL _____ IELTS _____

Name of Current School _____ Grade/ Diploma / Certificate Completed _____

Health Information: Family Doctor's Name: _____ Phone#: _____

Please detail all illnesses, diseases or physical disabilities which either have affected or may affect the student's general health, his/her school work or participation at ASCIS: _____

Does this student have any visual and/or auditory difficulties and/or allergies? ____ No ____ Yes If "yes", please explain: _____

CONSENT AND AGREEMENT *The custodial parents (and/or guardian(s)) of the student, or the student having attained the age of eighteen, must indicate their/his/her/ agreement and choices.*

1.0 Course and Fees

1.1 The undersigned agree to allow the student to be enrolled at Académie Ste- Cécile International School (ASCIS) for the **2022 Short Term programme**

1.2. The undersigned will instruct the student to follow all directives assigned to the student by ASCIS and the chaperones while the student will be at ASCIS in Canada.

1.3 The undersigned agree to pay all fees as invoiced and which will cover tuition, accommodation, books, activities and health insurance during the student's enrollment at ASCIS.

1.4 Should the student require pick-up and/or drop off, the undersigned will pay the supplemental fees as follows: _____ to and from Toronto Airport @ \$200.00 CAD. / _____ to and from Detroit Airport @ \$100.00 US

ASCIS must be notified in writing by fax or e-mail as to arrival/departure dates and times, airline and flight numbers.

1.5 The undersigned will send fees to **TORONTO DOMINION CANADA TRUST BANK / Address:** 596 Ouellette Ave P.O. Box 39 Windsor, ON N9A 6J8 / Transit Number: **38802** / SWIFT code: **TDOMCATTOR** / Account: **5222076** / ABA Routing: **026009593** / **Beneficiary: Academie Ste Cécile, Address:** 925 Cousineau Road, Windsor, Ontario N9G 1V8, Tel: (519) 969-1291 Fax: (519) 969-7953

1.6 The student understands that. Other than for medical reasons or visa refusals when full refunds will be issued, a refund (minus an administration fee of \$400.00) will be issued to a student who withdraws *in writing* no later than 3 months before the commencement of the student's programme at ASCIS. For students withdrawing for other reasons, a refund minus an administration fee of \$800.00 will be issued while any student withdrawing one month or less before the commencement of a programme will be issued 50% of the fees. The student further understands that once his/her session has begun, any and all fees paid and made payable to ASCIS are non-refundable.

1.7 The parent and student understand that regardless of the student's academic achievement, a persistently non-studious and/or non-cooperative student or a student who seriously breaches ASCIS' code of conduct may be given notice of termination. The student understands that Académie Ste-Cécile International School and/or its associates which manage ASCIS reserve(s) the right, notwithstanding the payment of any fee to terminate enrollment should the necessity to do so arise.

2.0 Personal Expenses/Student Allowance

2.1 While the student will not be charged to be at ASCIS (room and board), the student shall remain responsible to pay for all personal expenses. Therefore, the student agrees to have sufficient funds for him/her to use as spending money for his/her personal needs.

3.0 Activities

3.1 The undersigned grants permission to the student and to ASCIS 'Staff to allow the student to participate in all activities, excursions, field trips, events and performances organized by ASCIS' Staff, and which may include walking, travelling by motorized vehicle (i.e. by ASCIS school bus, or by rental bus or in a vehicle driven by a Canadian adult) within Canada and Michigan.

3.2 The undersigned understand that the student must remain compliant to all of the ASCIS directives during all activities, excursions and trips.

3.3 The student may not leave the ASCIS designated areas to visit relatives and personal friends and/or to stay overnight with them unless specific permission was secured in advance from ASCIS as well as from both the principal and the agent in Colombia. The undersigned understand that such permission is not necessarily automatic and that the student shall abide by the decision made by ASCIS and the Colombian Heads in-charge of this student.

4.0 Emergency Treatment

4.1 In case of a serious medical emergency involving the student, the undersigned understand that, while the student is in attendance at ASCIS, every effort will be made to contact the undersigned person(s):

Name: _____ Relationship: _____ Phone # _____

4.2 In case of any emergency situation that may arise during the student's attendance at ASCIS, the undersigned states:

that the student does not have any previous physical, emotional or mental disability and/or allergy about which the ASCIS should be aware;

or

that the student has a previous physical, emotional or mental disability and/or allergy about which ASCIS should be aware. **Details:**

4.3 The undersigned hereby grant ASCIS staff permission to notify and to use the services of an ambulance and/or to hospitalize the student so that appropriate medical care may be given. (i.e. medication and/or medical treatment) to him/her.

4.4 The undersigned also understand and agree that Académie Ste- Cécile International School and/or its principals and/or its officers and/or its associates and/or its staff assume no responsibility for ambulance or medical costs and that all such costs remain the student's responsibility.

4.5 The undersigned understand that the student and family remain solely responsible for all health insurance fees beyond the coverage of the international insurance assigned to the student for the duration of the student's programme at ASCIS.

4.6 The undersigned understand that in all circumstances which involve the student's attendance at ASCIS and/or his/her care by ASCIS' delegates, Académie Ste- Cécile International School and/or its principals and/or its officers and/or its associates and/or its staff is/are responsible only for any negligence of itself/ themselves, its employees, servants or agents and consequently assume no responsibility for any damages, losses or costs unless caused by such negligence.

5.0 Health Insurance

5.1 Insurance Information

For purposes of Health Insurance, the name of beneficiary is: _____

5.2. The undersigned understand that this plan does not cover a medical condition, known or unknown, which existed prior to the effective date of the policy, or any condition wholly or partly, directly or indirectly, related thereto and therefore, the undersigned understand that it shall be the responsibility of the student and family to pay for all costs associated with such treatment.

5.3 The undersigned authorize the designated Health Insurance Company and its signing officers to act as the student's attorneys and to have access to all documentation required to complete the student's claim.

Signature of Student

Date

6.0 Partial Invalidity

6.1 In the event that any provision of this document shall be held to be invalid, the undersigned agree that the same shall not affect in any respect whatsoever the validity of the remainder of this document.

7.0 School Promotion

7.1 The undersigned hereby grant to ASCIS the permission to interview and/or photograph and/or film the student in order for ASCIS to use these tapes and/or photographs and/or films for the purpose of promoting the school and the school's programmes to prospective parents and students. The undersigned understand that for these purposes, there will be no cost to him/her or to ASCIS.

8.0 Acknowledgement:

8.1 The undersigned understand that, in all circumstances which involve my attendance at ASCIS in terms of the student's personal care, Academie Ste-Cecile International School and/or its officers and/or its principals and/or its staff and/or its delegates:

(a) are authorized to give the student directives in terms of the care of this students; and

(b) are thus authorized to make decisions for the well-being and safety of the student and/or the school and/or the other staff and students; and

(c) are also authorized to inspect rooms and any suspicious belongings and, when necessary, to remove any belonging which may hinder the well-being and/or safety of the students and/or the school and/or the other students and staff; and

(d) are responsible only for any negligence of itself/themselves, its employees, servants or agents and consequently assume no responsibility for any damage, loss or cost unless caused by such negligence.

8.2 The undersigned hereby agree to abide by all the ASCIS policies and rules.

8.3 The undersigned affirm that the information provided herein is correct and true.

Printed Name of Father

Signature of Father

Date

Printed Name of Mother

Signature of Mother

Date