

APPLICATION FOR REGISTRATION

Name: _____

Surname: _____

Address: _____

Tel: _____

Mobile No: _____

ID Card No: _____

Fax: _____

Email: _____

I enclose the sum of £30 and wish to register for:

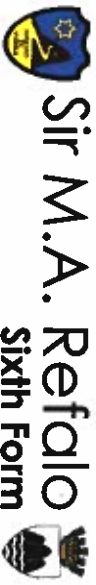
- Expressive Arts
- Football
- Sports and Fitness
- Sports and Fitness (Volleyball)
- Volunteering
- Citizenship

Eliminate P.E. lesson Yes NO

*Applicable only for those students applying for Expressive Arts, Sports and Fitness, Sports and Fitness (Volleyball) and Football.

Signature _____ Date _____

Completed Registration forms are to be handed in with your registration application.
Telephone: 2155 1592. Email: smarefalsixthform@ilearn.edunmt
Students dropping from the course will have to reimburse the school the sum of €25 to cover expenses incurred.



Presents



Short Courses

