



LinguaLinks : Registration form

Please complete the registration form giving full details about your child and family. A detailed description of your family and child will enable us to find the best match for your child.

Please fill in one form per child and send at least one photograph of your child.

1 • Your contact details

Father Legal Guardian

Mr., Dr Last Name : First Name :

Mother Legal Guardian

Mrs/ Miss, Dr Last Name : First Name :

Do parents live together? Yes No

Address 1 :

Address 2 :

Town : Post Code :

Region : Country :

Tel. : Mobile :

Email :

How did you hear about Lingualinks ?

Friends Name :

School Name :

Internet search

Press

Other How ?



First name :

Girl Boy

Date of birth :

We are interested in an exchange in :

France

Italy

Spain

Germany

Languages studied :	French	<input type="checkbox"/>	N° of years :
	German	<input type="checkbox"/>	N° of years :
	Italian	<input type="checkbox"/>	N° of years :
	Spanish	<input type="checkbox"/>	N° of years :
	Other :	N° of years :

Main interests

You may tick several responses but only those practised regularly.

Sports

Athletics	<input type="checkbox"/>	Badminton	<input type="checkbox"/>	Basketball	<input type="checkbox"/>	Boxing	<input type="checkbox"/>
Cycling	<input type="checkbox"/>	Fencing	<input type="checkbox"/>	Fishing	<input type="checkbox"/>	Football	<input type="checkbox"/>
Golf	<input type="checkbox"/>	Gymnastics	<input type="checkbox"/>	Horse Riding	<input type="checkbox"/>	Martial Arts	<input type="checkbox"/>
Rugby	<input type="checkbox"/>	Sailing	<input type="checkbox"/>	Skiing	<input type="checkbox"/>	Swimming	<input type="checkbox"/>
Table Tennis	<input type="checkbox"/>	Tennis	<input type="checkbox"/>	Cricket	<input type="checkbox"/>	Other :

Which is your child's preferred sport ?

Drama & Dance :

Modern dance Ballet Drama Other :

Musical instruments played :

Arts & crafts

Drawing & painting Pottery Sculpture Needlework
 Other :

Leisure

- Chess Board games Reading Classical music
 Pop Music TV Computer Cinema
 Walking Other :

Does your child belong to any organisations ? Scouts/guides
 Other :

How would you describe your child ?
 You may tick several boxes :

- Enthusiastic Extrovert Sociable Shy
 Sensitive Mature for age Artistic Sporty
 Not sporty Academic Other :

Does your child suffer from any allergies ? yes no
 If yes, which ones ?

Does your child need to follow a special diet ?
 Please give details.

Medical history. Will your child be required to take any medication during the exchange?
 yes no
 If yes, please specify :

Will you authorize the family to give medicine (such as Calpol) to your child ?
 yes no

Any activities in which your child should not /can not participate ?

The school

Type of school :

- Boarding
 Day
 Comprehensive
 Private
 Public
 State
 Grammar
 Other :

2 • Your child

School year : Y7 Y8 Y9 Y10 Y11
Y12 Y13

Name of school :
Address 1 :
Address 2 :
Town : Postcode :
Telephone : email :

Name of head teacher : Mr Mrs Miss
Name of French teacher : Mr Mrs Miss

3 • Your family and home

Nationality of father/legal guardian
Father/legal guardian's profession
Languages spoken

Nationality of mother/legal guardian
Mother/legal guardian's profession
Languages spoken

Number of brothers and sisters of applicant child :

Name : D.O.B : girl boy

Name : D.O.B : girl boy

Name : D.O.B : girl boy

Name : D.O.B : girl boy

You live in : a city
a town
a village
in the country

You live in a : house flat

3 • Your family and home

The visiting child will share a bedroom have his/her own bedroom

Do you have any animals ? Dog Cat Others

Is your family vegetarian vegan other special diets

Smoking No-smoking

4 • Your travel dates

Preferred dates for travelling abroad :
from to
from to
from to

Preferred dates for hosting child :
from to
from to
from to

Additional information concerning hosting and travel dates:

.....
.....

5 • Reference Family

Please give details of the person or school who told you about Lingualinks. If you were not introduced to us by a member of our network we ask you to provide us with family having children of a similar age as yours who we can contact to check references. This family should not be related to you. The quality of our network is of utmost importance to us.

Name : First name :

Title : Mr Mrs Miss

Email : Tel :

Address 1 :

Address 2 :

Town : Postcode :

Number of children ?

Child 1/ Name : Age : girl boy

Child 2/ Name : Age : girl boy

Child 3/ Name : Age : girl boy

How do you know this family ?

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Please give as much information as possible concerning your child, your family life and your environment to enable us to find a suitable family.

1. About your child

2. Your family and home environment

I confirm that this information is accurate and that I have read and agree to the terms and conditions available on www.lingua-links.com or by request.

Signature :

Date :

Notes concerning your registration.

Please return the registration form to the following address:
LinguaLinks 114 Princedale Rd, London W11 4NH

Please include with your registration form:

- Photos of your child and family. You may also email photos to: francesca@lingua-links.com
- The registration fee of £60 (75€) for the first child and £35 (38€) for each sibling
- If you are registering less than six weeks before the exchange or after April 1st please also include a separate check for the Introduction fee of £260 (290€) per child. The introduction fee will be refunded in full if we do not find you a family.

You may pay using one of the following methods:

- A sterling cheque made out to Lingualinks to be sent to :
Lingualinks 114 Princedale Rd, London W11 4NH
- Bank transfer for sterling payments only :

Lingualinks. Nat West bank. Shepherd's Bush Branch, 25 Shepherd's Bush Green, London W12 8PR.
Account No 18104177, sort code 60 11 13

Euro bank transfer : CIC Banque Privée Mulhouse SWIFT/IBC: (CMCIFRPP), 40 rue de la Sinne,
68100 Mulhouse, France. IBAN FR76 3008 7332 9100 0200 0840 273

Please do not hesitate to consult our website :
www.lingua-links.com or to contact us on 020 72434611 if you require assistance.

