



Instituto Mediterraneo Sol

FORM FOR UNDERAGE STUDENTS

Student Name:		Date of Birth:		Nationality:	
Name of the Mother, Father or Tutor:		Address:			
Post Code:		City:		Country:	
Telephone Number:		Fax:		E-mail:	
Contact Person and Telephone Number (in case parents are not reachable):		"Curfew" (not after 24.00 hrs.):			
Allergies:		Eating Habits:			
General Observations:					

"Yes, I have read and I agree the Behaviour and Conduct Rules for Teenagers and also the Information and General Conditions of Instituto Mediterráneo Sol".

Signature (father, mother or tutor): _____

Date: _____