

INESLE - Spanish Summer Program in Madrid - SPAIN

PAYMENT APPLICATION - Form **3**

Please Print or Type

Applicant/

Student Name: _____ Usually Called: _____
Last (family) First

Gender: M F Date of Birth: ____/____/____ Social Security Number: _____
Month/Day/Year

Home Address:

Street and Number Apt. #

City

State

Zip

Country

Applicant E-mail Address _____

Home Telephone (_____) _____

Parent Cell Phone (_____) _____

Parent E-mail Address _____

Parent's names:

Mother _____ Father _____

Applicant lives with :

Both Parents ___ Father ___ Mother ___ Guardian ___ Other ___

Name and home address of person financially responsible for student:

Title (Mr. and Mrs., Dr., etc.)

Last (family)

First

Middle

Address:

Street and Number Apt. #

City

State

Zip

Country

Relationship to student: _____

E-mail address: _____

INESLE Madrid

Avda. Monasterio de El Escorial, 35 -H- 4ºB

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carlos.aguado@inesle.com

www.inesle.com

Program Tuition:

4,950 €

Tuition includes:

Lodging with families; Classes; Health insurance; Afternoon activities in Madrid; Trips (except participants' food during the 4 days of the Pilgrim's way of St. James). Air-fare is not included.

Due dates for payments

To be sure that your child can participate on our summer program in Madrid, please make your payments by the dates indicated below to the bank account of INESLE Madrid.

March 15 st , 2023	1,000 euros deposit (non-refundable)
April 15 st , 2023	balance of due fees (4,950 – 1,000 = 3,950 euros at prices prevailing at time of writing)

Payment:

The acceptable means of payment is by Flywire (www.flywire.com/pay/inesle) or following bank transfer:

- Wire transfer to our bank using the following format exactly as printed:

Receiving Bank:	Banco Santander - Office #4338
Receiving Bank:	IBAN#: ES04 0049 4338 79 <i>International Bank Account Number</i>
Receiving Bank:	BIC / SWIFT: BSCHEMXX <i>Bank Identification Code</i>
Beneficiary Account Name:	INESLE EDUCACION, S.L.
Beneficiary Account #:	2610043812

Full IBAN # (electronic format):	ES0400494338792610043812
Full IBAN # (paper format):	ES04 0049 4338 7926 1004 3812

Concept:	INESLE Madrid 2023 - <i>Applicant Name</i>
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The signatures below indicate and acknowledge that we have read, understand and agree to the contents of this contract.

Signature of student: _____ Date: _____

Signature of parent: _____ Date: _____