

## FOIRM IARRATAIS / APPLICATION FORM

Ainm / Name .....

Cailín       Buachaill

Seoladh / Address .....

Fón do thí / Home telephone .....

(or one at which you can be contacted)

Fón póca / Mobile phone .....

Rphoist / Email .....

Dáta Breithe / Date of Birth .....

(Students must be between 10-18 years of age on 1/7/11)

Scoil / School .....

Seoladh / Address .....

Rang / Class .....

Ainm an Mhúinteora Gaeilge / Name of Irish Teacher?

Cúrsa atá uait / Choice of Course

<b>A</b>	05/06/11 - 27/06/11	
<b>B</b>	28/06/11 - 20/07/11	
<b>C</b>	21/07/11 - 12/08/11	

Teach Lóistín / Guesthouse of your choice if there is room.

(to be completed only by past pupils)

(Preferred Guesthouse cannot be guaranteed)

**Cara amháin** a bheidh ag fanacht leat

Name of **friend** you wish to be accommodated with.

If parents are away during course state the name and telephone number of person **who would be responsible** for child / children in case of emergency.

Name .....

Telephone .....

**Síniú an Tuismitheora / Caomhnóra**

(Signature of Parent / Guardian denoting acceptance of College Rules)

Dáta / Date .....

