



Kangourou-Cyprus

THALES Foundation

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KANGOUROU SUMMER CAMP 29 JULY - 3 AUGUST 2019 RODON HOTEL, AGROS

*All fields are required

STUDENT NAME/SURNAME:

BIRTH DATE: / /

SCHOOL NAME: CITY:

STUDENT'S MOBILE PHONE:

GRADE:

4th grade (Δ' Δημοτικού)

5th grade (Ε' Δημοτικού)

6th grade (ΣΤ' Δημοτικού)

7th grade (Α' Γυμνασίου)

8th grade (Β' Γυμνασίου)

9th grade (Γ' Γυμνασίου)

English Level / Επίπεδο Αγγλικών (*double click on box to choose*)

I understand that the lessons will be in English with support in the Greek language.

The student's level of English is Average Good Very Good Native Speaker

PARENT'S or GUARDIAN'S FULL NAME:

PARENT'S or GUARDIAN'S MOBILE PHONE:

EMAIL:

HOME PHONE:

FULL HOME ADDRESS:

CITY: **POSTAL CODE:**

Preferred bus origin:

Nicosia Limassol Larnaca Paphos Paralimni

Transfers from Paphos and Paralimni will be confirmed based on registration numbers.

- I will attend the Closing Event on Saturday, 3rd of August (morning) and pick up my child
- I will not attend the Closing Event on Saturday, 3rd of August (morning) so my child will return by bus

TOTAL FEE: €450

(including transfers, FB Accommodation in triple rooms, Material, Programme and Social Event)

.....
Parent's or Guardian's Signature

.....
Date

With my signature I agree to pay the amount of €450 by 15th June 2019.

When the application is received an invoice will be sent to the guardian with instructions for payment.

(SEND THIS APPLICATION TO support@thalescyprus.com or by fax to 22283609)