

PLEASE ENSURE ALL SECTIONS ARE FILLED OUT IN THEIR ENTIRETY BEFORE SUBMISSION TO AVOID REGISTRATION DELAYS

1. STUDENT INFORMATION

LAST NAME (MUST BE SAME AS ON PASSPORT) FIRST NAME (MUST BE SAME AS ON PASSPORT) MIDDLE NAME (MUST BE SAME AS ON PASSPORT)
 FEMALE MALE

GRADE ADDRESS CITY PROVINCE/STATE POSTAL CODE / ZIP NON-SPECIFIED

STUDENT PHONE NUMBER STUDENT EMAIL (PRINT CLEARLY) BIRTHDATE (DD/MMM/YYYY)

PRESENT SCHOOL (FULL NAME OF SCHOOL REQUIRED) CITY

HAVE YOU BEEN A STUDENT WITH BLYTH IN THE LAST 365 DAYS? YES NO
DO YOU HAVE A SIBLING ATTENDING BLYTH ACADEMY FLORENCE IN THE CURRENT ACADEMIC YEAR? YES NO

IS YOUR PASSPORT CURRENTLY VALID FOR 6 MONTHS AFTER THE SCHEDULED RETURN DATE? YES NO; I AM CURRENTLY RENEWING MY PASSPORT
*** PLEASE NOTE THIS IS A MANDATORY REQUIREMENT FOR TRAVEL AND IS NON-NEGOTIABLE***

PASSPORT NUMBER (#) CITIZENSHIP

2. PARENT/GUARDIAN INFORMATION

IF PARENTS ARE SEPARATED, WHICH PARENT IS THE LEGAL GUARDIAN OF THE APPLICANT? N/A PARENT 1 PARENT 2 JOINT

PARENT/GUARDIAN 1: LAST NAME FIRST NAME

ADDRESS CITY PROVINCE/STATE POSTAL CODE / ZIP

HOME PHONE NUMBER BUSINESS PHONE NUMBER CELL PHONE NUMBER PARENT/GUARDIAN 1 EMAIL

PARENT/GUARDIAN 2: LAST NAME FIRST NAME

ADDRESS CITY PROVINCE/STATE POSTAL CODE / ZIP

HOME PHONE NUMBER BUSINESS PHONE NUMBER CELL PHONE NUMBER PARENT/GUARDIAN 1 EMAIL

3. BLYTH ACADEMY FLORENCE PROGRAMS

FULL-YEAR OPTION **SEMESTER OPTION** **SINGLE-TERM OPTION**

TERM 1 & TERM 2 | TERM 3 & TERM 4 TERM 1 TERM 2 TERM 3 TERM 4

4. TRAVEL INFORMATION (MUST CHECK ONE)

I WILL JOIN THE ROUND-TRIP GROUP FLIGHTS FROM TORONTO I WILL MAKE MY OWN TRAVEL ARRANGEMENTS AND RECEIVE A FLIGHT DISCOUNT

5. INSURANCE AND CANCELLATION PROTECTION (CANCELLATION PROTECTION MUST BE PURCHASED AT TIME OF REGISTRATION)

I WILL PURCHASE THE MEDICAL INSURANCE & CANCELLATION PROTECTION PLAN I WILL PURCHASE CANCELLATION PROTECTION ONLY
 I DO NOT WANT MEDICAL INSURANCE NOR CANCELLATION PROTECTION I WILL PURCHASE MEDICAL INSURANCE ONLY

- ALL CANCELLATION PROTECTION & MEDICAL INSURANCE FEES ARE NON-REFUNDABLE
- CANCELLATION PROTECTION AND/OR MEDICAL TRAVEL INSURANCE MUST BE PURCHASED OR DECLINED AT TIME OF REGISTRATION
- MEDICAL TRAVEL INSURANCE IS ONLY AVAILABLE TO CANADIAN RESIDENTS WHO HAVE VALID PROVINCIAL HEALTH COVERAGE
 - PRE-EXISTING MEDICAL CONDITIONS ARE NOT COVERED. OTHER EXCLUSIONS APPLY. REFER TO POLICY FOR DETAILS
 - BASED ON TERM DATES ONLY. COVERAGE NOT INCLUDED DURING THE WINTER BREAK

6. PAYMENT (DEPOSIT PLUS \$495 REGISTRATION FEE MUST ACCOMPANY THIS APPLICATION)

**IF PURCHASING INSURANCE OR CANCELLATION PROTECTION, PLEASE INCLUDE THIS AMOUNT IN YOUR PAYMENT.
THE REMAINING INSTALLMENTS, INCLUDING DEPARTURE TAXES WILL BE CHARGED TO YOUR CREDIT CARD AS PER THE TIMELINES SPECIFIED IN ACCORDANCE WITH YOUR SELECTIONS.**

PLEASE NOTE THE FOLLOWING:

- YOUR REGISTRATION FEE MUST ACCOMPANY THIS APPLICATION FORM IN ORDER TO RESERVE A PLACE IN BLYTH ACADEMY FLORENCE
- PLEASE NOTE BLYTH WILL RETAIN YOUR CREDIT CARD INFORMATION ON FILE AS LONG AS THE STUDENT IS ATTENDING BLYTH ACADEMY EITHER TO COVER THE INSTALLMENT PAYMENTS IF YOU SELECTED THIS OPTION OR FOR ANCILLARY FEES AND COSTS THAT MAY BE INCURRED DURING THE YEAR.

THE FOLLOWING PAYMENT METHOD(S) ARE AVAILABLE TO YOU:

- VISA MASTERCARD AMERICAN EXPRESS POST-DATED CHEQUES ENCLOSED PAYABLE TO BLYTH ACADEMY FLORENCE

CARD NUMBER	EXPIRY	AMOUNT (\$)
CVV	I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS	CARDHOLDER SIGNATURE
NAME ON CARD	<input type="checkbox"/> WIRE TRANSFER (IF PAYING VIA WIRE TRANSFER, PLEASE INCLUDE AN ADDITIONAL \$25.00 CAD FOR BANK SERVICE FEES)	
	BENEFICIARY NAME: BLYTH EDUCATIONAL TRAVEL BENEFICIARY BANK: BANK OF MONTREAL BENEFICIARY BANK ADDRESS: 55 BLOOR STREET WEST, TORONTO, ONTARIO; M4W 1A6	ACCOUNT NUMBER: 1198201 SWIFT CODE: BOFMCAM2 TRANSIT NUMBER: 03892

7. TERMS AND CONDITIONS

- ALL CANCELLATIONS MUST BE MADE IN WRITING
- REGISTRATION FEE OF \$495 IS NON-REFUNDABLE IN CASE OF CANCELLATION
- ALL CANCELLATION PROTECTION & MEDICAL INSURANCE FEES ARE NON-REFUNDABLE UNDER ANY CIRCUMSTANCE
- CANCELLATION PROTECTION AND/OR MEDICAL TRAVEL INSURANCE MUST BE PURCHASED OR DECLINED AT THE TIME OF REGISTRATION
- MEDICAL TRAVEL INSURANCE IS ONLY AVAILABLE TO CANADIAN RESIDENTS WHO HAVE VALID PROVINCIAL HEALTH COVERAGE
- PRE-EXISTING MEDICAL CONDITIONS ARE NOT COVERED. OTHER EXCLUSIONS APPLY. REFER TO POLICY FOR DETAILS
- TUITION FEES MAY BE ELIGIBLE FOR A PARTIAL REFUND ACCORDING TO THE FOLLOWING TIMELINES:
 - GREATER THAN 180 DAYS (6 MONTHS) PRIOR TO DEPARTURE OF THE 1ST TERM ATTENDED:**
TUITION FEES PAID ARE 100% REFUNDABLE (EXCLUDING ALL OF THE ABOVE ITEMS)
 - GREATER THAN 120 DAYS (4 MONTHS) PRIOR TO DEPARTURE OF THE 1ST TERM ATTENDED:**
TUITION FEES PAID ARE 50% REFUNDABLE (EXCLUDING ALL OF THE ABOVE ITEMS)
 - 120 DAYS (4 MONTHS) – 90 DAYS (3 MONTHS) PRIOR TO DEPARTURE OF TO THE 1ST TERM ATTENDED:**
TUITION FEES PAID ARE 25% REFUNDABLE (EXCLUDING ALL OF THE ABOVE ITEMS)
 - WITHIN 90 DAYS (3 MONTHS) PRIOR TO DEPARTURE OF THE 1ST TERM ATTENDED:**
TUITION FEES PAID ARE 100% NON-REFUNDABLE, UNLESS A VALID CANCELLATION CLAIM HAS BEEN SUBMITTED AND APPROVED
- AN NSF FEE OF \$50 WILL BE APPLIED TO ALL CHEQUES PROCESSED WITH INSUFFICIENT FUNDS.
- LATE PAYMENTS WILL BE ASSESSED A \$50 SURCHARGE FOR FAILURE TO PAY BY THE DATE(S) SPECIFIED ON ALL INVOICES.
- **TUITION FEES DO NOT INCLUDE THE FOLLOWING: DEPARTURE TAXES, CANCELLATION PROTECTION, MEDICAL INSURANCE, REGISTRATION FEE, LOCAL TRANSPORT, LUNCHES, TEXTBOOKS AND SCHOOL SUPPLIES, MATERIALS FEE, OPTIONAL EXCURSIONS, AND SPECIAL EVENTS**
- BOARDING FEES INCLUDE TWO (2) MEALS PER DAY (BREAKFAST & DINNER)
- BLYTH ACADEMY FLORENCE WILL BE CLOSED DURING THE WINTER BREAK (DEC – JAN) AND STUDENTS **WILL NOT** HAVE THE OPTION TO REMAIN IN RESIDENCE. ROUND TRIP GROUP FLIGHTS FROM ITALY TO TORONTO WILL BE INCLUDED FOR FULL YEAR, SEMESTER 1, AND TERM 2 STUDENTS.
- ALTHOUGH THE DIPLOMAS GRANTED BY BLYTH ACADEMY FLORENCE ARE RECOGNIZED INTERNATIONALLY AND ALLOW ACCESS TO UNIVERSITIES WORLDWIDE, THEY DO NOT HAVE LEGAL VALUE IN ITALY

I HAVE READ AND AGREE TO THE TERMS AND FEES OF THIS PROGRAM. I AM AWARE OF THE CANCELLATION POLICIES AND AGREE NOT TO DISPUTE OR ATTEMPT TO CHARGE BACK THE ABOVE SIGNED FOR AND ACKNOWLEDGED CHARGE(S). I AM AWARE IT IS MY RESPONSIBILITY TO ENSURE SUFFICIENT FUNDS ARE AVAILABLE IN ALL ACCOUNTS SPECIFIED FOR PAYMENT. I HEREBY AUTHORIZE BLYTH ACADEMY TO CHARGE THESE ACCOUNTS AS PER THE TIMELINES SPECIFIED IN ACCORDANCE WITH MY SELECTIONS.

SIGNATURE OF THE PARENT / GUARDIAN (IF UNDER 18)

DATE

6. MEDIA RELEASE

To be completed by the student his/her self if the student is 18 years of age or older:

Release on the use of the images or work

Mr/Ms _____, born in _____, on _____ and resident in _____,

Fiscal code no. _____ (hereinafter "Student")

AUTHORIZES

Blyth Academy Florence S.r.l. (hereinafter, "Blyth") and/or other companies of Blyth's group to use the work/s created by the Student - listed in the document attached hereto sub lett. "A", in order to form an integral part of this agreement - (hereinafter the "Work") to use it/ them for commercial and advertising purposes.

The Student gives his/her consent and also authorizes Blyth without limits of space and time:

- (i) to store the Work, if in digital format, on its own computers and databases;
- (ii) to publish the Work on the intranet, on any of its websites and/or through any other form or means of communication which Blyth deems necessary for the achievement of the purposes herein illustrated;
- (iii) use the Work to promote and advertise Blyth activities and its image in any manner, also including or displaying the Work or any excerpts or compilations of the Work in promotional material that appears in physical or electronic media (including but not limited to print, radio, television, websites or emails) presented outside the Blyth community in relation to Blyth educational programs.

The Students agrees and acknowledges that no consideration shall be paid shall be paid by Blyth for the use and the exploitation of the Work for the above purposes, as the far as the use by Blyth of the Work will also benefit the image of the Student.

[Place] _____, [date] _____

Legible Signature _____

To be completed by the Parents/Guardians if the student is under the age of 18:

Release on the use of the images or work

Mr/Ms _____, born in _____, on _____ and resident in _____,

Fiscal code no. _____

Mr/Ms _____, born in _____, on _____ and resident in _____,

Fiscal code no. _____ (hereinafter, "Parents")

on their own and as parents of the student

Mr/Ms _____, born in _____, on _____ and resident in _____,

Fiscal code no. _____ ((hereinafter "Student") (hereinafter, collectively, "Holders")

AUTHORIZES

Blyth Academy Florence S.r.l. (hereinafter, "Blyth") and/or other companies of Blyth's group to use the work/s created by the Student - listed in the document attached hereto sub lett. "A", in order to form an integral part of this agreement - (hereinafter the "Work") to use it/ them for commercial and advertising purposes.

The Holders give their consent and also authorize Blyth without limits of space and time:

- (i) to store the Work, if on digital format, on its own computers and databases;
- (ii) to publish the Work on the intranet, on any of its websites and/or through any other form or means of communication which Blyth deems necessary for the achievement of the purposes herein illustrated;
- (iii) use the Work to promote and advertise Blyth activities and its image in any manner, also including or displaying the Work or any excerpts or compilations of the Work in promotional material that appears in physical or electronic media (including but not limited to print, radio, television, websites or emails) presented outside the Blyth community in relation to Blyth educational programs.

The Holders agree and acknowledge that no consideration shall be paid shall be paid by Blyth for the use and the exploitation of the Work for the above purposes, as the far as the use by Blyth of the Work will also benefit the image of the Student.

[Place] _____, [date] _____

Legible Signature (1°parent) _____

Legible Signature (2° parent) _____

BLYTH ACADEMY FLORENCE PAYMENT SCHEDULES (CAD\$)

FULL YEAR OPTION

Full Year: Start Date September 6, 2018

Upon Registration	Deposit + Registration Fee	\$ 1,965.00	\$ 495.00	
March 15, 2018	Installment	\$ 4,225.00		
April 15, 2018	Installment	\$ 4,225.00		
May 15, 2018	Installment	\$ 4,225.00		
June 15, 2018	Installment	\$ 4,225.00		
July 15, 2018	Installment	\$ 4,225.00		
August 15, 2018	Installment	\$ 4,225.00		
September 15, 2018	Installment	\$ 4,225.00		
October 15, 2018	Installment	\$ 4,225.00		
November 15, 2018	Balance + Taxes*	\$ 4,225.00	\$ 1,600.00*	
		\$ 39,990.00	\$ 2,095.00	\$ 42,085.00

****Plus Cancellation and/or Medical Insurance fees (if selected)****

SEMESTER OPTION

Terms 1 & 2: Start Date September 6, 2018

Upon Registration	Deposit + Registration Fee	\$ 990.00	\$ 495.00	
March 15, 2018	Installment	\$ 5,750.00		
April 15, 2018	Installment	\$ 5,750.00		
May 15, 2018	Installment	\$ 5,750.00		
June 15, 2018	Balance + Taxes*	\$ 5,750.00	\$ 1,600.00*	
		\$ 23,990.00	\$ 2,095.00	\$ 26,085.00

****Plus Cancellation and/or Medical Insurance fees (if selected)****

Terms 3 & 4: Start Date February 6, 2019

Upon Registration	Deposit + Registration Fee	\$ 990.00	\$ 495.00	
August 15, 2018	Installment	\$ 5,500.00		
September 15, 2018	Installment	\$ 5,500.00		
October 15, 2018	Installment	\$ 5,500.00		
November 15, 2018	Balance + Taxes*	\$ 5,500.00	\$ 1,000.00*	
		\$ 22,990.00	\$ 1,495.00	\$ 24,485.00

****Plus Cancellation and/or Medical Insurance fees (if selected)****

*Estimated Amount - Departure Taxes and Service Charges are subject to change and will be invoiced with the final installment. Registration Fee is charged on a one-time annual basis (not per Term or per Semester)

SINGLE TERM OPTION

Term 1: Start Date September 6, 2018

Upon Registration	Deposit + Registration Fee	\$ 990.00	\$ 495.00	
March 15, 2018	Installment	\$ 5,500.00		
June 15, 2018	Balance + Taxes*	\$ 5,500.00	\$ 1,000.00*	
		\$ 11,990.00	\$ 1,495.00	\$ 13,485.00

****Plus Cancellation and/or Medical Insurance fees (if selected)****

Term 2: Start Date November 14, 2018

Upon Registration	Deposit + Registration Fee	\$ 990.00	\$ 495.00	
April 15, 2018	Installment	\$ 6,000.00		
July 15, 2018	Balance + Taxes*	\$ 6,000.00	\$ 1,600.00*	
		\$ 12,990.00	\$ 2,095.00	\$ 15,085.00

****Plus Cancellation and/or Medical Insurance fees (if selected)****

Term 3: Start Date February 6, 2019

Upon Registration	Deposit + Registration Fee	\$ 990.00	\$ 495.00	
August 15, 2018	Installment	\$ 5,500.00		
November 15, 2018	Balance + Taxes*	\$ 5,500.00	\$ 1,000.00*	
		\$ 11,990.00	\$ 1,495.00	\$ 13,485.00

****Plus Cancellation and/or Medical Insurance fees (if selected)****

Term 4: Start Date April 16, 2019

Upon Registration	Deposit + Registration Fee	\$ 990.00	\$ 495.00	
October 15, 2018	Installment	\$ 5,500.00		
January 15, 2019	Balance + Taxes*	\$ 5,500.00	\$ 1,000.00*	
		\$ 11,990.00	\$ 1,495.00	\$ 13,485.00

****Plus Cancellation and/or Medical Insurance fees (if selected)****

*Estimated Amount - Departure Taxes and Service Charges are subject to change and will be invoiced with the final installment.
Registration Fee is charged on a one-time annual basis (not per Term or per Semester)