

Enrolment on a *First come-First served* basis
ARIELLE - 086 305 7747 WhatsApp only
enquiry@livinglanguage.ie

SPORTING ACTIVITIES → FREE !



Bubble-Football, Judo, Canoeing, Wall-climbing, Cycling, Tennis, GAA, Excursions etc.

THU 06 — WED 12 JULY 2023

So, how does it work?...



You attend morning German classes, while

the German student, boy/girl 13 - 16, whom you welcome in your home for 1 week attends morning English classes.

(Without hosting, programme @ €300/week)

GERMAN TUITION → FREE !



Native German teachers work on **aural & oral [pronunciation, elocution, accent]** organising debates, interviews, role-plays,

news bulletins, short stories, presentations, treasure hunts etc. through German, in a relaxed and enjoyable atmosphere. Sporting and cultural activities are **shared with the foreign students:** An Asset for your oral exams.



Application Form to be sent to **102 Pembroke Road, D4** or to **enquiry@livinglanguage.ie** (French/Spanish available)
An **Information Meeting** for parents & students will be held.

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REGISTRIERUNGSDATEI
APPLICATION FORM
DUBLIN BILINGUAL SUMMER CAMP 2023

NAME:
VORNAME

GROSSBUCHSTABEN
BITTE
BLOCK LETTERS
PLEASE

ARIELLE
No. _____
Received

CHRIST. NAME:
GEBURTSDATUM

DATE OF BIRTH: _____ / _____ / _____ **ALTER** _____ **Geschlecht** _____
AGE: _____ **Sex:** **F** **M**

ADRESSE
FULL ADDRESS: _____

STADT
TOWN: _____

VATER (Haus) _____ **FATHER (h)** _____ **MUTTER (Haus)** _____ **MOTHER (h)** _____

BLOCK LETTERS
_____ **Schüler-Student's** _____

IM NOTFALL _____ **(Verwandte)** _____
EMERGENCY CONTACT: _____ **(Relation)** _____

ELTERNBERUF: **VATER** _____ **MUTTER** _____
PARENTS' PROFESSION: FATHER: _____ **MOTHER:** _____

Zahl der SCHWESTERN _____ **ALTER** _____ **BRÜDER** _____ **ALTER** _____
Nbr. OF: SISTERS: _____ **AGE:** _____ **BROTHERS:** _____ **AGE:** _____

Besuchte Schule _____ **Lehrer für Deutsch** _____ **Schuljahr** _____
SCHOOL: _____ **German Teacher:** _____ **Sch. Yr.:** _____

PERSÖNLICHKEIT _____ **ABGEHEND** _____ **KONTAKTFREUDIG** _____ **KÜNSTLERISCHER** _____ **SCHEUER** _____ **SPORTLICH** _____
PERSONALITY: **OUTGOING** **SOCIABLE** **ARTISTIC** **QUIET** **SPORTY**

Gründe für deine Anmeldung _____ **HOBBIES** _____
Why are you applying? _____

GESUNDHEITS/ALLERGIE/ERNÄHRUNGSPROBLEME
ANY HEALTH PROBLEM/ALLERGY/DIET: _____

Hast du einen separaten Schlafraum? _____
Do you avail of an extra bed-room? _____

Deutsch: **Zehr Gut** _____ **Gut** _____ **Schwach** _____
German: **Good** _____ **Average** _____ **Weak** _____

Spricht
Spoken

Schriftlich
Written

Venue:
SAINT CONLETH'S COLLEGE—D4
Classes and Activities are free. For coach transfers to external activities, a small nominal fee will be required.

"My child can partake in physical sporting activities and does so under my responsibility. In case of accident/illness of my child, I authorise Living Language to make all the necessary emergency medical arrangements."
"My child can swim 50m" No Yes
PARENT'S SIGNATURE: _____
DATE: _____ / _____ / 20_____

1 aktuelle
PASSFOTO
Bitte
Name at the back
Namen auf der
Rückseite
Irischer Student

