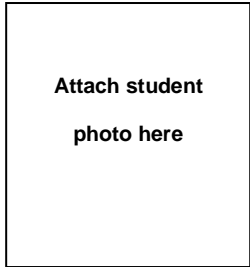


Enrolment form

Group Programme and Study Tours

Please complete this form in English – Please print carefully.



School/Group Name Kanazawa University 2021 Online

Family Name _____

First Name _____

Date of Birth (day/month/year) _____

Gender Male Female

Address _____

Email Address _____

Telephone No _____ Fax No _____

Emergency Contact:

Name _____

Relationship _____

Address _____

Telephone No _____ Fax No _____

Email Address _____

School / Agent use only (mandatory)

Is this applicant suitable to participate in a WPC Group and Study Tour programme in New Zealand?

Yes No

Is there anything the WPC should be aware of with this applicant?

Yes No

If yes, please give details _____

Signed: _____

Designation: _____

Date: _____