





Fundesicar (									Caribe), CIS (Ca gh School, Naple	rtagena International s, FL
Program					Spanish Language and Cultural Immersion Program, Cartagena, Colombia					
Date of the Program					June 23 to July 6, 2019					
Registration 0	Cod	le								
				INFC	RMA	ATION A	BOUT THE ST	UD	ENT	
NAME							IDENTIFICATIO	N	PASSPORT	No.:
/SURNAME							DOCUMENT		DRIVER LICENSE	No.:
GENDER	F	М	AGE		DAT BIR	E OF TH			NATIONALITY	
DOES THE CHILD NEED ANY SPECIAL ACCOMMODATION			YES	NO		WHAT TYPE				
THE CHILD TAKE MEDICATION	THE CHILD TAKES ANY MEDICATION			YES	NO		SPECIAL INSTRUCTION			
ANY ALLERGIES	NY ALLERGIES		YES			WHICH				
					NO					
BLOOD GROUP			RH							
NAME OF THE SH	NAME OF THE SHCOOL								GRADE	
INSURANCE COMPANY/PHONE							TYPE			
				INFO	RMAT	ION OF P	ARENTS OR GUA	ARDI	IANS	
MOTHER NAME / SURNAM	ΙE									
ADDRESS										
PHONE NUMBER	HONE NUMBER WORK				но		ME			
EMAIL										
FATHER NAME / SURNAM	ΙE									
ADDRESS										
PHONE NUMBER	2		WORK						НОМЕ	
EMAIL										







APPROVED	YES	NO
NAME/SURNAME		
responsibility, to participate in the Spanish La accordance to the activities indicated within the best to me, by the program organization team. Here impairment to participate in any of the indicated of the program, as well as its activities, and I declar to carry out the processing of perspective in the Spanish La accordance in the Spanish La accordance to the activities in the Spanish La accordance to the activities indicated within the baseline in the Spanish La accordance to the activities indicated within the baseline in the Spanish La accordance to the activities indicated within the baseline in the Spanish La accordance to the activities indicated within the baseline in the Spanish La accordance to the activities indicated within the baseline in the spanish to the program organization team. Here indicated in the program organization team.	on/daughter anguage and Cultural Immersion prochure, and the official terms an eby, I declare that my son/daught program activities. I also declare are that the participation is voluntarersonal and sensitive data, activity and deletion for purposes strictly in	d conditions catalog provided er has no physical or menta that I am aware of the nature y, in the same way I authorize that includes the collection related to the purpose of the
storage, updating, use, transmission, transfer a activities related to the legal purpose of Fundesic that these will not be delivered to third parties fo policy.	_	•

1. COPY OF THE STUDENT VALID PASSPORT

2. COPY OF THE INSURANCE CARD