

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) _____ FEMALE MALE

GRADE _____ ADDRESS _____ CITY _____ PROVINCE/STATE _____ POSTAL CODE / ZIP _____

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 GLOBAL HIGH SCHOOL 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. GLOBAL HIGH SCHOOL 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 AN AIR CREDIT

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 GAP BETWEEN TERMS 2 AND 3.

6. PAYMENT

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.
- 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.

VISA MASTERCARD AMERICAN EXPRESS POST-DATED CHEQUES ENCLOSED PAYABLE TO BLYTH EDUCATIONAL TRAVEL

CARD NUMBER	EXPIRY	AMOUNT (\$)
NAME ON CARD	<input type="checkbox"/> I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS	CARDHOLDER SIGNATURE

GLOBAL HIGH SCHOOL PAYMENT SCHEDULES

FULL YEAR OPTION

Full Year: Start Date September 2, 2016

Upon Registration	Deposit + Registration fee	\$ 1,880.00	\$ 495.00	
February 1, 2016	Installment	\$ 7,485.00		
March 24, 2016	Installment	\$ 7,485.00		
April 10, 2016	Installment	\$ 7,485.00		
June 24, 2016	Balance + Taxes*	\$ 7,485.00	\$ 1,295.00*	
September 7, 2016	Installment	\$ 7,485.00		
November 10, 2016	Balance + Taxes*	\$ 7,485.00	\$ 1,695.00*	
		\$ 46,790.00	\$ 3,485.00	\$ 50,275.00

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

SEMESTER OPTION

Terms 1 & 2: Start Date September 2, 2016

Upon Registration	Deposit + Registration fee	\$ 1,400.00	\$ 495.00	
February 1, 2016	Installment	\$ 8,000.00		
March 24, 2016	Installment	\$ 8,000.00		
June 24, 2016	Balance + Taxes*	\$ 6,990.00	\$ 1,295.00*	
		\$ 24,390.00	\$ 1,790.00	\$ 26,180.00

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

Terms 3 & 4: Start Date February 21, 2017

Upon Registration	Deposit + Registration fee	\$ 1,400.00	\$ 495.00	
April 10, 2016	Installment	\$ 8,665.00		
September 7, 2016	Installment	\$ 8,665.00		
November 10, 2016	Balance + Taxes*	\$ 7,660.00	\$ 1,695.00*	
		\$ 26,390.00	\$ 2,190.00	\$ 28,580.00

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

SINGLE TERM OPTION

Term 1: Start date September 2, 2016

Upon Registration	Deposit + Registration Fee	\$ 1,190.00	\$ 495.00	
February 1, 2016	Installment	\$ 5,500.00		
June 24, 2016	Balance + Taxes*	\$ 5,500.00	\$ 1,095.00*	
		\$ 12,190.00	\$ 1,590.00	\$ 13,780.00

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

Term 2: Start date October 23, 2016

Upon Registration	Deposit + Registration Fee	\$ 1,190.00	\$ 495.00	
March 24, 2016	Installment	\$ 5,500.00		
July 24, 2016	Balance + Taxes*	\$ 5,500.00	\$ 1,095.00*	
		\$ 12,190.00	\$ 1,590.00	\$ 13,780.00

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

Term 3: Start date February 21, 2017

Upon Registration	Deposit + Registration Fee	\$ 1,190.00	\$ 495.00	
April 10, 2016	Installment	\$ 6,500.00		
November 10, 2016	Balance + Taxes*	\$ 6,500.00	\$ 1,395.00*	
		\$ 14,190.00	\$ 1,890.00	\$ 16,080.00

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

Term 4: Start date April 13, 2017

Upon Registration	Deposit + Registration Fee	\$ 1,190.00	\$ 495.00	
September 7, 2016	Installment	\$ 5,500.00		
January 7, 2017	Balance + Taxes*	\$ 5,500.00	\$ 795.00*	
		\$ 12,190.00	\$ 1,290.00	\$ 13,480.00

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

*Departure taxes and service charges are subject to change.
Registration fee of \$495.00 is charged on a one time annual basis (not per term or semester).

7. TERMS AND CONDITIONS

- ALL CANCELLATIONS MUST BE MADE IN WRITING
- ALL DEPOSITS, INCLUDING HEALTH & WELLNESS FEES, E-BOOK FEES, AND REGISTRATION FEES ARE NON-REFUNDABLE UNDER ANY CIRCUMSTANCE
- 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
- ENROLMENTS RECEIVED WITHIN 30 DAYS PRIOR TO DEPARTURE ARE SUBJECT TO AVAILABILITY AND TO A SURCHARGE
- TUITION FEES MAY BE ELIGIBLE FOR A PARTIAL REFUND ACCORDING TO THE FOLLOWING TIMELINES:

GREATER THAN 120 DAYS PRIOR TO THE 1ST TERM ATTENDED:
TUITION FEES PAID ARE 50% REFUNDABLE (EXCLUDING ALL OF THE ABOVE ITEMS)

120 DAYS – 90 DAYS PRIOR TO THE 1ST TERM ATTENDED:
TUITION FEES PAID ARE 25% REFUNDABLE (EXCLUDING ALL OF THE ABOVE ITEMS)

WITHIN 90 DAYS (4 MONTHS) PRIOR TO 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.
- ITEMS NOT INCLUDED IN TUITION FEES: DEPARTURE TAXES, CANCELLATION PROTECTION, MEDICAL INSURANCE, REGISTRATION FEE, LOCAL TRANSPORT, LUNCHES, TEXTBOOKS AND SCHOOL SUPPLIES, MATERIALS FEE, OPTIONAL EXCURSIONS, MANDATORY ACTIVITIES FEE, AND SPECIAL EVENTS

8. 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

8. MEDIA RELEASE

At Blyth we provide a rich learning environment where students learn both from our teachers and from the guided collaborative work they do in our programs.

We are proud to share this environment with our current and future students, alumni and family members by featuring students and their work on our websites and in other electronic and print media, as well as in presentations, open houses, student introduction nights and the like.

To assist in carrying out, enriching, developing and publicizing our programs we request the following consents from you and your parents or guardians.

1. I understand that during my participation in Blyth programs Blyth may record me and my voice, both individually and as part of any group, in any physical or electronic manner including but not limited to still photographs and audio/video recordings, and that Blyth will make excerpts and compilations of these recordings (the recordings, excerpts and compilation are referred to collectively as **recordings**).
- (a) I authorize Blyth to make, copy, publish and otherwise include recordings of me in websites and other physical or electronic media published or presented by or on behalf of Blyth for the **Blyth community** (Blyth students, alumni and their family members). I understand that Blyth may charge Blyth community members for publications such as yearbooks.
 - (b) I authorize Blyth to include or display recordings of me 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, which I understand will be used only in relation to Blyth educational programs.

If you do not agree, it is your responsibility to identify yourself to the photographer or videographer, and temporarily remove yourself from situations in which recordings are being made.

I DO AGREE **I DO NOT AGREE**

2. During my participation in Blyth programs I may be creating a number of **works** including but not limited to photographs, videos, drawings, paintings, texts, blogs, emails, evaluations, surveys and papers.
- (a) I authorize Blyth to record, copy and publish in any physical, electronic or other manner any of my works or any excerpts or compilations made by or on behalf of Blyth from or including my work, which may be combined with the work of myself or other people, for the Blyth community. I understand that Blyth may decide to use or print all or part of my name in association with my work, or may refrain from stating my name altogether.
 - (b) I authorize Blyth to include or display my work or any excerpts or compilations of my 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.

I DO AGREE **I DO NOT AGREE**

3. The above authorizations are subject to the following:
- (a) The rights I grant to Blyth are non-exclusive, meaning that I may use my own work for any other purposes, and Blyth is entitled to carry out any of its permitted activities regarding works or recordings without payment to me.
 - (b) Title to all recordings, photographs, videos or other publications or reproductions made by Blyth (including Blyth photographs or recordings of me or my works) belongs to and remains with Blyth. I understand that I am not permitted to copy or publish anything described in the preceding sentence in any manner, including without limitation copying or uploading pictures of me or my works taken by Blyth from any Blyth website onto any hard drive or other website.
 - (c) Under no circumstances does Blyth incur any liability to me or other parties in respect of any use by me or other parties of any material described in paragraphs 1 and 2, or any recordings or copies of me or my works made by parties other than Blyth, that is carried out without the prior written consent of Blyth, and I release Blyth in respect of all such liability on behalf of myself and anyone who may claim through me.

Any rights or release granted to or retained by Blyth may be used by and accrues to the benefit of Blyth and its parent, related, subsidiary or affiliated entities and any and all of their respective officers, directors, agents and employees and all of the heirs, executors, personal representatives, administrators, successors and assigns of all of the foregoing parties.

STUDENT NAME _____ STUDENT PHONE NUMBER _____ STUDENT EMAIL _____

STUDENT HOME ADDRESS _____

STUDENT SIGNATURE _____ DATE _____

WE _____
(PARENTS' / GUARDIANS NAMES), CONSENT TO THE STUDENT'S PARTICIPATION AND THE TERMS SHOWN ABOVE, INCLUDING BUT NOT LIMITED TO PARAGRAPH 3(c).

PARENT/GUARDIAN SIGNATURE _____ DATE _____