



VENUSA

International Studies and Modern Languages
Mérida, Venezuela

STUDENT APPLICATION 1-1 Spanish Immersion Program

Complete one application per student and return to: venususa@earthlink.net

VENUSA, US Contact office
6542 Hypoluxo Rd 324
Lake Worth, FL 33467

I would like to request the following option: Plata Oro Platino
I would like to request a homestay: Yes No

DATE: _____

Name: _____ Age: _____ Gender: M F

Local address: _____ Passport# _____

Preferred 1-1 Program Start Date: _____ Finish date: _____

If requesting homestay, complete this section:

Preferred Homestay Dates: _____ Number of nights: _____

Arrival into Merida: Airline (flight, time, date) _____
 Bus (station, time, date) _____
 Car (time, date) _____

Do you smoke? Yes No

Do you have allergies? Yes No Details: _____

Native language: _____ Other languages: _____

Spanish level: Beginner Intermediate High Intermediate Advanced

I would like to concentrate on:

Conversation Grammar Oral Writing Reading Comprehension

Please indicate how you heard of the VENUSA programs: _____

Release & Waiver

I hereby release VENUSA, or teacher/group leader for any loss and/or damage whatsoever, and, without restricting the generality of the foregoing, shall particularly not hold VENUSA responsible neither for any sickness, injury (including death), nor for any loss and/or damage arising from any errors and/or omissions contained in VENUSA literature. I fully understand that VENUSA, its employees, directors, the home and/or attending school, homestay family members and/or friends, are not responsible for personal child-care, and are not responsible for the well-being, injury (including death) that may arise under any type of childcare situation (i.e. childcare at homestay, nursery school, or any other location). I fully understand that my child may not participate in field-trips or any other event deemed inappropriate for the child by VENUSA. I understand that VEN-USA is not responsible for my well-being when I am absent from VEN-USA supervised activities, during free time periods, on a visit to friends and/or relatives, or during periods of independent travel, and I understand that VEN-USA, its employees, agents, my teachers/group leaders, home and/or attending school and school board are not responsible to me for events beyond their control, or acts of omission of person or entities outside their control, including (without limitations) airlines, surface transportation companies, hotels, restaurants, host families, and other suppliers of program services. I agree to release VEN-USA, its' agents, directors, employees, my home and/or attending school, school board and teacher/group leader from all claims arising out of such events. The terms contained herein shall serve as a waiver of liability of VEN-USA and an assumption of risk on behalf of myself, my heirs, executors, administrators and assigns of any and all known and unknown, personal injuries, emotional trauma, death or property loss.

I have read and understand the above release/waiver, program options and payment policy.

Signature: _____ Date: _____

Print name: _____