

## Program Selection

### FALL 2025

☐ Toronto, ON ☐ Vancouver, BC

Start Date	Sept 1	Sept 8	Sept 15	Sept 22	Sept 29	Oct 6	Oct 13	Oct 20
1 Week	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
3 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
4 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
5 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
6 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
7 Weeks	<input type="radio"/>	<input type="radio"/>						

### WINTER 2026

☐ Toronto, ON ☐ Vancouver, BC

Start Date	Jan 5	Jan 12	Jan 19	Jan 26	Feb 2
1 Week	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
3 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
4 Weeks	<input type="radio"/>	<input type="radio"/>			

### SPRING 2026

☐ Toronto, ON ☐ Vancouver, BC

Start Date	Mar 2	Mar 9	Mar 16	Mar 23	Mar 30
1 Week	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
3 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
4 Weeks	<input type="radio"/>	<input type="radio"/>			

### SUMMER 2026

☐ Toronto, ON ☐ Vancouver, BC

Start Date	July 6	July 13	July 20	July 27	Aug 4	Aug 10	Aug 17	Aug 24
1 Week	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
3 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
4 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
5 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
6 Weeks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
7 Weeks	<input type="radio"/>	<input type="radio"/>						
8 Weeks	<input type="radio"/>							

## Student Information

Last Name\*:

\*As it appears on passport

Middle Name\*:

\*As it appears on passport

First Name\*:

\*As it appears on passport

Gender:

☐ M

☐ F

☐ Other:

Please specify.

Date of Birth:

YYYY

/

MM

/

DD

Nationality:

Mother Tongue:

Email:

Country:

Address:

City:

Province:

Postal Code:

Phone Number:

Passport #:

Passport Expiry Date:

YYYY

/

MM

/

DD

**Student's English Level** (Self or Agent-Assessed) (If known)

☐ Beginner

☐ Intermediate

☐ Advanced

## Legal Guardian Information

Full Name:

Relationship:

Email:

Phone Number:

**Emergency Contact** (only fill if not same as legal guardian)

**Same as legal guardian**

Full Name:

Relationship:

Email:

Phone Number:

## Agency Information If applicable

Agency Name:

Contact Name:

Contact Email:

### Accommodation Information

Accommodation Type: **Homestay** (private room with 3 meals/day) **Self-Arranged** (please specify)

Homestay accommodation check-in / check-out is always Saturday to Saturday (check-out by 10 am).

Special Requests or Preferences: **Private Bath Single** **ADD On \$100/week** Additional Requests or Preferences:

ILAC will do its best to accommodate your requests, however, due to availability ILAC cannot guarantee that your request will be granted.

### Airport Transfer

Standard Airport Pick-up

Arrival Date: / /  
YYYY MM DD

Airline:

Flight #:

Standard Airport Drop-off

Departure Date: / /  
YYYY MM DD

Airline:

Flight #:

### Medical & Health Information

*ILAC Essential Health Care is included for the duration of your course (from arrival date in Canada).*

Do you have any allergies? ☐ Yes ☐ No Explain, including reactions:

Can you live with pets? ☐ Yes ☐ No If **No**, explain why:

Diet & Nutrition: **Regular Diet** **Vegetarian** **Vegan** **Gluten Intolerance** **Lactose Intolerance**

\*Special Diet Fee: \$50/week.  
Please refer to ILAC's brochure  
or website for all details.

Other (Explain in detail):

- ☐ I have reviewed the ILAC Teens Program activities and feel that **the student can participate without restrictions.**
- ☐ I have reviewed the ILAC Teens Program activities and feel that **the student can participate with the following restrictions or adaptations:**

Please list additional medical, mental, emotional, and social health information regarding the student below.

### Signature

#### ENROLMENT CONSENT & POLICY ACKNOWLEDGEMENT

**This document is important. In accepting it, you are confirming you understand and agree to all English content contained in this document.**

I, hereby certify that the above information is true and complete. I understand that any false or incomplete information submitted in support of my registration may invalidate my registration. I agree to speak only English on School property. I have read and understand all of ILAC Policies & Procedures including the Tuition Refund Policy and the Dispute Resolution Policy. All students must sign an enrolment contract prior to program start date, including signature of parent or legal guardian for minors. I hereby consent to ILAC to releasing my personal information to any third party who applied and/or paid for the services on my behalf. Private information includes, without limitation, full name, date of birth, country of origin, gender, insurance plan type, policy number, policy group, policy ID number, the effective and expiry date of the insurance.

#### Schedule "A" –Release, Waiver, and Indemnity (the "Release")

To: International Language Academy of Canada Inc. ("ILAC"), its resellers, agents, employees, indemnitors, successors, landlords, accommodation providers and suppliers (collectively, the "Releasees")

1. Assumption of Risks - I understand that the Releasees are offering me the opportunity to participate in activities (collectively, the "Activities"), such as: classroom instruction (on premises and via online delivery), accommodation with host families or in student residences, indoor and outdoor excursions, educational tours, and social events, and airport transfer (from and/or to airport), which involve risks, dangers, and hazards, including but not limited to: potential exposure to Covid-19, allergic reaction, food borne illness, accidents during any of the Activities, including while during transport/travel, stress, health and medical conditions, and the negligence of participants, third parties, or the Releasees. I freely accept and fully assume all such risks, dangers, and hazards and the possibility of personal injury, death, property damage, and loss resulting therefrom.
2. Waiver and Release - In consideration of the Releasees agreeing to my participation in the Activities, I waive all claims that I have or may in future have against the Releasees and release them from any and all liability for any loss, damage, expense, or injury, including death, that I may suffer as a result of my participation in the Activities due to any cause whatsoever, including any negligence, breach of contract, or breach of a duty of care, including any failure to take reasonable steps to safeguard or protect me from the risks, dangers, and hazards of participation.
3. Miscellaneous - In executing this Release, I am not relying on any oral or written representations or statements of the Releasees other than as set forth in this document. This Release is effective and binding upon my heirs, successors, assigns, and representatives. Any matters arising from this Release will be governed by the respective provincial laws (British Columbia, or Ontario), and I irrevocably attorn to the jurisdiction of the courts of that Province in such matters.
4. Photos & Promotion - I hereby give the Photographer/Filmmaker and Assigns my permission to license the Images and to use the Images in any Media for any purpose, which may include, among others, advertising, promotion, marketing, and packaging for any product or service. I understand my testimonial or video recorded of me (the "Testimonial") and made on behalf of ILAC (hereinafter called "The Business") may be used in connection with publicizing and promoting The Business. I authorize The Business to use my name, brief biographical information, and the Testimonial as defined on this form or by me in this video. I hereby irrevocably authorize The Business to copy, exhibit, publish or distribute the Testimonial for purposes of publicizing The Business' programs or for any other lawful purpose. These statements may be used in printed publications, multimedia presentations, on websites or in any other distribution media.

Parent/Guardian Signature:

Date Signed:

YYYY / MM / DD

#### TRAVEL & TRIP RISK ACKNOWLEDGEMENT/LIABILITY WAIVER – ILAC TEENS PROGRAM

- I, give my consent for my son/daughter to participate in ILAC Teens Program field trips and activities operated by partner companies during his/her stay in Canada.
- I understand that participation in field trips and the activities they entail could involve risk of physical injury, illness, death or property loss, and that while taking all necessary safety precautions, ILAC cannot guarantee safety thereof, as all risks cannot be prevented.
- I understand that ILAC does not provide health and accident insurance for field trips outside of Canada, or any insurance beyond those provided under the ILAC Health Care Plan where said plan applies, and I understand that any medical expenses, property loss, and/or other personal expenditures that result during or from this trip, are to be borne by the parent or guardian.
- In consideration of the opportunity afforded, with full knowledge and acceptance of the risks associated with field trip and any recreational activities those entail, and with full understanding of the above issues/conditions and risks, I hereby release, indemnify and hold harmless ILAC, the International Language Academy of Canada Toronto/Vancouver, and its faculty/staff, trustees, officers, volunteers, and agents from all forms and manners of risks inherent in, and from all claims, suits and demands of any nature arising from participation in said trip, or activities.

Parent/Guardian Signature:

Date Signed:

YYYY / MM / DD

**CODE OF CONDUCT FOR MINORS** In addition to the Policies and Procedures, ILAC expects all underage students to read, understand and follow the full Code of Conduct for Minors.

1. **UNDERAGE DEFINITION** - In Canada, the age of majority is determined by each province and territory. In Ontario, the age of majority is 18 years old, whereas in British Columbia the age of majority is 19 years old.
2. **NO DRINKING** - The legal drinking age to consume or purchase alcohol in Ontario and British Columbia is 19 years old. This includes legal entry into nightclubs and bars. Drinking underage and/or the use of fake identification is strictly prohibited.
3. **NO DRUGS** - Carrying and/or using illegal drugs is strictly prohibited in Canada. A police investigation will follow. This can lead to criminal charges, arrest, and/or imprisonment.
4. **USE OF FAKE I.D.** - Fraud is illegal in Canada and the use of false identification is strictly forbidden.
5. **NO SMOKING** - The legal smoking age in Canada is set by each province & territory in Canada. In Ontario & British Columbia, the legal smoking age at which a person is allowed to buy tobacco products, including cigarettes, is 19 years old.
6. **NO SLEEPOVERS** - Students must sleep at their prearranged accommodation every night.
7. **CURFEW AT 10:00 P.M.** - Underage students must be home by 10:00 P.M. every night. If a student is not home at this time the homestay family has the responsibility to inform ILAC's homestay department.
8. **GOOD BEHAVIOUR** - As a regular member of a homestay family, students must respect the individual rules of the household. This includes shower use, telephone use, mealtimes, and other necessary rules.
9. **PUNCTUALITY** - Be on time. Students must be punctual at all the established meeting points and class times.
10. **HAVE MEDICAL INSURANCE** - Students must carry a medical insurance card with them at all times.
11. **HAVE A COPY OF YOUR PASSPORT** - Students must have a photocopy / screenshot of their passport on them at all times.
12. **ATTENDANCE POLICY** - Attendance in classes is mandatory. Students must let ILAC know ASAP when they are sick or cannot attend their classes for any reasons. Being absent without justifiable and excusable notification may lead to academic probation. If students are sick and will be absent, students must: Call ILAC's front desk line; or Email the ILAC Teens Department.

Student Signature:

Date Signed:

YYYY / MM / DD

Parent/Guardian Signature:

Date Signed:

YYYY / MM / DD