ICASSI 2023 REGISTRATION FORM

*Registration is also available online at ICASSI.cventevents.com*

PART A: IDENTIFYING INFORMATION

Please complete this form and include a copy of the receipt from the bank transfer or check and send it to the administrator Sabine Landscheidt by email [info.icassi@gmail.com](mailto:info.icassi@gmail.com)

**PARTICIPANTS:**

|  |  |  |
| --- | --- | --- |
| **First and Last Name** | **Sex** | **Profession** |
| **1.** |  |  |
| **2.** |  |  |

Children and Youth under 18: Please give date of birth and exact age of children and youth (age as of July 15, 2023 registration day) to assist in arranging staﬀ for the children’s and youth courses.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Child/ Youth** | **Date of Birth** | **Sex** | **Age** |
| **1.** |  |  |  |
| **2.** |  |  |  |

**Mailing Address: Please use block capitals if hand printing**

House Number & Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal/ Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please ensure your email address is very clearly written as we communicate primarily by E-mail.

List any handicap accommodations needed or health concerns\* \_\_\_\_\_\_\_\_\_

\* This background information is needed in case of emergency.

In case of emergency contact\*\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number of emergency contact\*\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email of emergency contact\*\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*This information is requested in case of health or other emergencies.

PART B: COURSE CHOICES

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name of Participant 1:** | | | | | | |
|  | **EITHER Half-Day** | | | |  | **OR Full-Day** |
| **Week 1** | | **Week 2** | | **Week 2** |
| **AM** | **PM** | **AM** | **PM** | **Full-Day** |
| **1st Choice** |  |  |  |  |  |
| **2nd Choice** |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name of Participant 2:** | | | | | | |
|  | **EITHER Half-Day** | | | |  | **OR Full-Day** |
| **Week 1** | | **Week 2** | | **Week 2** |
| **AM** | **PM** | **AM** | **PM** | **Full-Day** |
| **1st Choice** |  |  |  |  |  |
| **2nd Choice** |  |  |  |  |  |  |

|  |  |
| --- | --- |
| **Child’s or Youth’s Name** | **Yes/No** |
| **1.** |  |
| **2.** |  |

**Children and Youths under 16 participate in designated classes. Please list their names and indicate whether they will take part in the Children’s/Youth Program.**

Youths 16-17 will be enrolled in Y-2 in the mornings but may select an afternoon class from the main curriculum from among those courses open to youth or attend the youth recreation program Y-3. Please indicate the name and course selection below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Week 1** | | **Week 2** | |
| **Name of Youth (16-17)** | **AM** | **PM** | **AM** | **PM** |
|  | Y-2 |  | Y-2 |  |
|  | Y-2 |  | Y-2 |  |

PART C: CALCULATION OF FEES (Page 1 of 2)

SUMMER SCHOOL PACKAGE

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Summer School Pkg.** | **One**  **Week** | **Both**  **Weeks** | **# of**  **Persons**  **1 Week** | **# of**  **Persons 2 Weeks** | **TOTAL** |
| **Early Bird Adult (Before March 31st)** | 585€ | 1035€ |  |  | € |
| **Adult** | 635 € | 1095€ |  |  | € |
| **College Student\*** | 535€ | 805€ |  |  | € |
| **Youth (12-17)\*\*** | 395€ | 705€ |  |  | € |
| **Child (4 - 11)** | 320€ | 575€ |  |  | € |
| **REDUCED FEES\*\*\*** |  |  |  |  |  |
| **Adult/College Student** | 395€ | 705€ |  |  | € |
| **Youth (12-17)** | 345€ | 640 € |  |  | € |
| **Child (4-11)** | 295€ | 545€ |  |  | € |
| **Fee for accomodating partners\*\*\*\*** | 255 € | 515€ |  |  | € |
| **TOTAL** | Line 1: Carry to next page | | | | € |

All fees are based on EURO

\*Full time University or College students in academic year 2022/2023 or 2023/2024

**\*\* All ages are based on age as of July 15, 2023**

*\*\*\* To be eligible for this fee you must live in one of the countries listed*

*\*\*\*\**Fee for adult partners of participants when partners do not take classes and stay in ICASSI accommodations

**Summer School Package**

The Summer School Package includes tuition, dinner on Sunday, Monday, Wednesday and Friday of each week, registration drinks, opening and welcome reception, farewell dinner, coffee breaks and organizational fees. Note: It does not include dinner on Tuesday, Thursday or Saturday. You can buy meal tickets when you register for the summer school at 42€ for the Tuesday and Thursday dinner per week.

**Accommodations: Room and Breakfast**

Accommodation fees include room and breakfast. Prices listed are all per person.

PART C: CALCULATION OF FEES (Page 2 of 2)

Note: Rates apply to children, youth and adults.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ACCOMMODATION**  **Please refer to Descriptions** | **One**  **Week** | **Both**  **Weeks** | **# for 1 Week** | **# for 2 Weeks** | **TOTAL** |
| **DCU (College Park and Hampstead) – Per Person**  **Note: All rooms are ensuite. 5 rooms (4 single/ 1 Double (Hampstead) or 4 Double/ 1 Single (College Park)) share a common living room with a kitchen. The rooms do not have air conditioning. Rooms for disabled are available.** | | | | | |
| **Single Room (ensuite bath)** | 315€ | 685€ |  |  | € |
| **Double Room (2 Twinbeds which can be zipped together to form a Queen Size bed) (ensuite bath)** | 300€ | 655€ |  |  | € |
| **Child under 12 on a foldout mattress as an additional third person in a double room (including breakfast) - limited availabilitybath)** | 150€ | 330€ |  |  | € |
| **Youth under 17 on a foldout mattress as an additional third person in a double room (including breakfast) - limited availability** | 180€ | 365€ |  |  | € |
| **Child 3 or under in a baby cod** | Free | Free |  |  | € |
| **TOTAL FROM ABOVE** | Line 2 | | | | € |
| **TOTAL SUMMER SCHOOL PACKAGE** | Line 1 (from previous page) | | | | € |
| **TOTAL SUMMER SCHOOL PACKAGE + ACCOMMODATIONS** | Line 2 + Line 1 | | | |  |
| **IF AFTER JUNE 15 ADD A PROCESSING FEE OF 75€** | 75€ | | | | € |
| **SUBTRACT DEPOSIT** | Individual: 300€; Family: 550€ | | | | € |
| **BALANCE DUE** |  | | | | € |
| **SCHOLARSHIP FUND ++** | Please list me on the web: yes/no | | | | € |
| **TOTAL** | Payable by June 15, 2023 | | | | € |

PART D: DIETARY

In order to prepare enough food to serve persons with dietary needs we are asking you to complete this chart for anyone for whom it applies.

| **Name** | **Name** | **Name** |
| --- | --- | --- |
| is vegetarian | is vegetarian | is vegetarian |
| is vegan | is vegan | is vegan |
| is gluten-free | is gluten-free | is gluten-free |
| is lactose intolerant | is lactose intolerant | is lactose intolerant |