



YOUR ONLINE ENGLISH SCHOOL. KEEPING IT SIMPLE & SMART

REGISTRATION FORM



A Student Information

Last Name:

E-mail:

First Name:

Country:

City:

Gender: M F X

Address:

Date of Birth:

Province:

Postal Code:

Nationality:

Emergency Contact:

Primary Language:

Emergency Contact Phone:

Passport #:

Are you currently in Canada? Yes No

WhatsApp Phone:

Are you planning on attending a university or college in Canada? Yes No

Cambridge Test

Token Number:

Results:

B Program Preference

Full Time (20 lessons per week)

Monday - Friday or
Sunday - Thursday



Slot 1 Slot 2 Slot 3

Slot 4 Slot 5

Some programs are not available in every time slot. Please speak to an admissions advisor for more details. If you are unsure what time your lessons start in your time zone, please visit ilac.com/ilac-kiss-virtual

General English

Cambridge English (FCE, CAE & CPE)

IELTS Preparation

Business English

University Pathway

Number of Weeks: Weeks

Start Date:

C Pathway College Info

Only complete this section if you selected "University Pathway" as your program preference.

College / University Name:

Undecided

Program Name:

Undecided

I have applied to a college: Yes No Start Date:

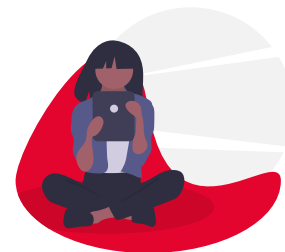
I will use the ILAC Pathway services to apply to a college or university: Yes No

The agency is doing the application process directly with the college/university: Yes No



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D Agent	Have you been in contact with an agent?	Yes	No		
	Agency:		City:		Country:
	Contact Agent:		Agent Email:		

E Device	What device will you access classes on?	Desktop	Laptop	Tablet	Smartphone	Other (specify below)
	Device model:					

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 have read and understand all of ILAC policies & procedures including the [Tuition Refund Policy](#).