



Application Form for International Participants

**Short Vacation Course in Islamic Republic of Iran
Organised by Al-Asr London UK
+44 208 572 8960 / +44 7785 220 960**

**Affix
passport-sized
photograph
here**

For Office Use Only

Reference: M/F

.....

Application Received

.....

Paid cash/cheq/draft

\$.....

Note: Please write in capital letters & name should be as it is in the passport.

Personal Details

Title

First Name

Middle Name

Last Name

Fathers Name

Nationality

Date of Birth (DD/MM/YYYY)

Gender Male Female

Passport Information

Passport Number

Place of Issue

Date of Issue

Expiry Date

Additional Details

Height feet/meters

Marital Status Single
 Married
 Other

Education School
 College
 University
 Post Graduate
 Other

Work Status Student
 Employed
 Self Employed
 Unemployed
 Other

Address

Street Address

City

State/Country

Zip/Postal Code

Country

Contact Information

Home Phone

Mobile Phone

E-mail

Occupation

Medical Conditions

I hereby apply for the admission of Short Vacation Course and also agree to abide with the following:

- I shall attend the course in full. I will only leave with permission or in emergency, should such circumstances arise. I will follow the Course Leader's/Supervisors' instructions throughout the course.
- I shall use the facilities provided to me, such as boarding, lodging, transportation etc.
- I have obtained permission from my parent/guardian/relative and I have taken written consent and have obtained the reference below.
- I shall pay US \$2700 net by International money order payable to "Al-Asr London UK" or Credit Al-Asr's A/c No.77153367 NatWest Bank, Branch Sort Code 60-11-18, Hounslow Middlesex UK
- I shall apply and get an Iranian visa at the Embassy of Iran in my own country (Al-Asr London will assist if any difficulty arises in obtaining visas).
- I will make firm arrangements to reach and to be collected from Heathrow Airport.
- I will arrive in London as arranged between Al-Asr and the applicant and reach the Iran Air Desk at Heathrow Airport, Terminal 3 Departures, at 1:00pm on Sunday 11th July to join the Al-Asr group. (It is highly recommended to arrive one day early.)
- I understand that Al-Asr London UK is responsible for the trip from 1:00 pm Sunday 11th July starting at the Iran Air desk in Heathrow Airport, Terminal 3 Departures until the group returns on Tuesday 10th August 2010 at Heathrow Airport, Terminal 3 Arrivals at 12:00pm. Any arrangement before and after the arranged dates is my own responsibility. (Al-Asr can provide services on request, before & after the course for minimal charges).
- I will arrange my own insurance (if I need or wish for it).
- If I have a complaint whilst on SVC I will bring it to the attention of the Course Leader. I will not spread it around. If it cannot be settled amicably first by the management, then it will be referred to mutually agreed Muslim arbitration. Such matters will be kept confidential.
- In the event when schedules change (regrettable beyond Al-Asr's control), I will continue to co-operate and support the management.
- I will notify Al-Asr of any disability, illness or medical condition and will make arrangements for its treatment.
- I will obey the laws and regulations of the Islamic Republic of Iran.
- I will wear uniform starting from the first day at the airport and as directed by Al-Asr - white full-sleeve shirt and black/dark blue trousers for brothers and black/dark blue mantu (ankle length light material overcoat), head scarf and dark socks for sisters. For further information, contact Al-Asr.

Signature.....Date.....

Consent by Parent/Guardian/Relative

I.....have read and understood the brochure for the Short Vacation Course, and to the best of my knowledge, hereby certify that the details provided by my son/daughter in this application form for the course are true. I fully understand that every effort will be made by Al-Asr for the applicant's well being and his/her successful completion of the course. I give my consent for him/her to participate in the course.

Signature.....Date.....

**Reference for All Participants/Students
from Local Resident Alim or Any Other Prominent Community Worker**

Full Name Occupation

Address Zip/Post code

Telephone Mobile Email

Comments

Signature.....Date.....