

WEL Workshop & Fair Application

September 27th (Seoul, Korea) 2019

School Information :

PLEASE COMPLETE EACH BLANK (CAPITAL LETTER) SPACE BELOW, SIGN, SCAN AND RETURN BY EMAIL TO US.

School Name : _____
Address : _____ Post code : _____
City : _____ State/Province : _____ Country : _____
Phone : _____ Fax : _____ Skype : _____
E-mail : _____ Website : _____

Participants :

1st Attendee : Mr. () Ms. () _____ Position : _____
2nd Attendee : Mr. () Ms. () _____ Position : _____
Direct e-mail and mobile phone number of Attendee : _____

About Your School :

What types of course are you interested in representing? (Mark with an X)

- | | | |
|--|---|---|
| <input type="checkbox"/> High School | <input type="checkbox"/> Business English Program | <input type="checkbox"/> Postgraduate Program |
| <input type="checkbox"/> Language Course | <input type="checkbox"/> Specialized/Certificate Course | <input type="checkbox"/> MBA |
| <input type="checkbox"/> Summer Programs | <input type="checkbox"/> Undergraduate Degree/Bachelor | <input type="checkbox"/> Masters/Doctorate |

South Korean Visa –Invitation Letter

Please tick if you need an official invitation letter to get the visa.

- 1st Attendee 2nd Attendee

By TT or Wire : Bank details :

Bank Name: Kookmin Bank (Jamsil Nam Branch). Account No: 478768-11-003123
Account Name: Nam Sang Soon Swift BIC: CZNBKRSEXXX
Bank Address: 1-8, Samjeon-dong, Songpa-gu, Seoul, Korea. TEL: 822 2197 3614

Term and Conditions

I read the Term & Conditions on www.seoulworkshop.com and agreed with it, on behalf of the School, I confirm to participate in the WEL workshop in South Korea. The participation fees are remitted by the Wire Transfer..

The credit card to guarantee for your participations **Master** **Visa** **American Express**

Card Number: _____ Name of Cardholder: _____

Expiry date: _____ Cardholder Signature: _____

Signature :

Date:

PLEASE SIGN AND RETURN BY E-MAIL TO seoulworkshop4u@gmail.com or FAX TO 82 2 3477 0251