**R**EGISTRATION **F**ORM

**Instructions & Important Deadlines.** (Please read it carefully)

I. Please fill all the columns with **CAPITAL LETTERS** only.

II. Hippo Summer Camp & HiPPO Play Off Qualifiers 2025 are organized in collaboration with Bucksmore Education. Bringing together young learners from all over the world and offering a customized English experience to suit all levels.

III. The fee for this camp can be paid through Online Deposit Slip/Bank Draft/Pay Order/Internet Banking, drawn in favor of **CREATIVE LEARNING SERVICES.**

Or

The fee can also be directly transferred to our A/C: **CREATIVE LEARNING SERVICES,** A/C No: **18587901695803**,IBAN: **PK82HABB0018587901695803,** NTN: **B408028,** Bank Name: **HABIB BANK LIMITED,** Branch**: H-BLOCK, DHA, PHASE - I, LAHORE**.

IV. In case of visa refusal, all fees will be refunded minus embassy and administration fee of **£470.** The refund will be made within 25 working days.

V. There will be no refund once the visa is issued.

VI. **A fee of UK**₤ **150/= will be charged for any withdrawal after the registration once done.**

VII. No One is allowed to accompany him/her during the Hippo Summer Camp & HiPPO Play Off Qualifiers 2025.

VIII. In accordance with our governing regulations, a fine of up to **UK**₤ **5000/=** may be levied against individuals whose actions adversely impact the organization's reputation or credibility in any manner.

IX. For any information on the Hippo Summer Camp & HiPPO Play Off Qualifiers 2025, you are advised to contact only +92-42-35744666,+92-42-35692728, +92-321-8882252 and +92-324-4219999.

X. The last date for submitting the registration form & Fee is: **April 20, 2025.**

**For Student: Rs. 1,101,630/=**

**The fee includes everything that is listed below:**

**1.** Arrival/departure transfers

2. All teaching and learning materials

**3.** Accommodation

**4.** All meals

**5.** Activities

**6.** One excursion

**7.** Personalized report card & certificate

8. Visa

9. Economy Class round trip air ticket

**10.** Travel Insurance

XI. The registration form complete in all respects should be sent to the following Postal Address:

**CREATIVE LEARNING SERVICES**

**Hippo Summer Camp & HiPPO Play Off Qualifiers 2025**

1st Floor, G-2, Commercial Area, Phase – I, Masjid Chowk

Defence Housing Authority, Lahore Cantt. 54792

**Phone**: +92-42-35744666, +92-42-35692728

For further assistance, please contact us through **Email:** info@hippo.org.pk; **Off:** +92-42-35744666, +92-42-35692728 +92-321-8882252, +92-324-4219999, +92-321-9311119.

**Scanned Documents to Attach with the Registration Form:**

✓ Paid Online Deposit Slip/Bank Draft/Pay Order/Internet Banking

✓ Passport photo **(First page)**

✓ 1 Photograph **(45mm high by 35mm wide, taken against a plain light-colored background,**

 **showing your full head and upper shoulders, with no shadows or glare)**

**UNDERTAKING:**

I/We at this moment undertake that:

1. I/We have read and acknowledged the terms & conditions mentioned in this registration form for the Hippo Summer Camp & HiPPO Play Off Qualifiers 2025.
2. I assure that my institution will fully abide by Creative Learning Services code of conduct, all rules, regulations and instructions of the Hippo Summer Camp & HiPPO Play Off Qualifiers 2025 being enforced time to time.
3. I also certify that I have enclosed Deposit Slip/Bank Draft/Pay Order in favour of **CREATIVE LEARNING SERVICES** in original bearing No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ amounting to Rs. (in figures) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as a participation fee for International Round to compete with students worldwide to be held on **August 5-12, 2025** at **Oxford International College (OIC), Brighton - UK**
4. The documents provided along with this registration form are correct to the best of my knowledge.

**SIGNATURES & STAMP**

PRINCIPAL /HEAD OF THE INSTITUTION

1. **INSTITUTION’S DETAILS**

INSTITUTION’S NAME:

|  |
| --- |
|  |
|  |

INSTITUTION’S POSTAL ADDRESS:

|  |
| --- |
|  |
|  |
| DISTRICT |  |
| PHONE (S) |   |
| E-MAIL |  |

1. **PRINCIPAL’S CONTACT DETAILS (FIRST CONTACT)**

|  |  |
| --- | --- |
| NAME |  |
| CELL NO.  |  | LANDLINE |  |
| E-MAIL |  |

1. **COORDINATOR’S CONTACT DETAILS (SECOND CONTACT)**

(An official to coordinate and to correspond in the absence of Principal)

|  |  |
| --- | --- |
| NAME |  |
| CELL NO.  |  | LANDLINE |  |
| E-MAIL |  |

Deposit Slip/Bank Draft/Pay Order in original

**PLEASE ATTACH HERE**

A/C Title: **CREATIVE LEARNING SERVICES** NTN: **B408028**

A/C No: **18587901695803**

IBAN: **PK82HABB0018587901695803**

Bank Name: **HABIB BANK LIMITED,** Branch: **H-BLOCK, DHA, PHASE - I, LAHORE**

1. **STUDENT DETAILS**
* Please enter student information precisely as per your institution's official records in **CAPITAL LETTERS**.
* Each student requires a separate registration form.
* Once registered, no student can be replaced or exchanged, so ensure accuracy.

|  |
| --- |
| **STUDENT PARTICULARS** |
| **Class/Grade** |  | **Candidate ID** |  |
| **Surname** |  |
| **Given Name** |  |
| **Father Name** |  |
| **D.O.B** | DD.MM.YYYY |
| **Gender** | MALE / FEMALE |
| **Passport No.** |  |
| **Issue date** |  |
| **Expiry date** |  |
| **Contact No.** |  |
| **Email** |  |

|  |
| --- |
| **CHAPERON PARTICULARS**For Invitation Letter Only |
| **Surname** |  |
| **Given Name** |  |
| **Father Name** |  |
| **Relation** |  |
| **D.O.B** | DD.MM.YYYY |
| **Gender** | MALE / FEMALE |
| **Passport No.** |  |
| **Issue date** |  |
| **Expiry date** |  |
| **Contact No.** |  |
| **Email** |  |

**PARENT/GUARDIAN CONSENT FORM**

(Only filled for students traveling without a guardian)

I, Mr./Mrs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CNIC No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father/Mother of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_do hereby give our permission to my son/daughter to participate in the Hippo Summer Camp / HiPPO Play Off Qualifiers 2025 to be held in **Oxford International College (OIC), Brighton**, **UK** from **August 5-12, 2025**. I permit my son/daughter to travel and participate in the Hippo Summer Camp / HiPPO Play Off Qualifiers 2025 organized by Bucksmore Education - UK, Association Global Hippo - Italy and Creative Learning Services - Pakistan.

**Permission and Release**

I grant permission for my child to participate in the Hippo Summer Camp / HiPPO Play Off Qualifiers 2025 and related activities, and I release and hold harmless Creative Learning Services, its employees, and affiliates from any claims or liabilities arising from my child's participation.

**Medical and Emergency Contact Information**

I confirm that my child has no medical conditions that would prevent them from participating in the Hippo Summer Camp / HiPPO Play Off Qualifiers 2025. In case of an emergency, I can be contacted at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**Photography and Media Release**

I grant permission for Creative Learning Services to take photographs or videos of my child during the Hippo Summer Camp / HiPPO Play Off Qualifiers 2025, and I understand that these may be used for promotional purposes.

**Undertaking**

I have read and understood the terms of this consent form and provide my signature below along with the copy of our CNIC’s:

|  |  |
| --- | --- |
| **PARENTS** | **WITNESS** |
|  |  |
| **Signature:** |  | **Signature:** |  |
| **Name:** |  | **Name:** |  |
| **Address:** |  | **Address:** |  |
|  |  |  |  |
| **Phone No.:** |  | **Phone No.:** |  |

**INSTRUCTIONS:**

* The students have to abide by the instructions and rules of the supervisor during their stay for the Hippo Summer Camp / HiPPO Play Off Qualifiers 2025.