

1 >
personal details

1	Family name	<input type="text"/>	(Photograph) Please attach a recent photograph of yourself, with your name printed on the reverse
2	Given names	<input type="text"/>	
3	Preferred first name	<input type="text"/>	
4	Date of birth	Day <input type="text"/> Month <input type="text"/> Year <input type="text"/>	
5	Nationality	<input type="text"/>	
6	Passport number	<input type="text"/>	
7	Passport place of issue	<input type="text"/>	
8	Expiry date	Day <input type="text"/> Month <input type="text"/> Year <input type="text"/>	
9a	Are you aware of any reason you would be denied entry to New Zealand? Yes <input type="checkbox"/> No <input type="checkbox"/>		
9b	If yes please provide details <input type="text"/>		

Attendance of the Via programme is subject to an entry permit or visa to New Zealand being granted by the New Zealand Immigration Service. We will do all we can to assist with this, but cannot guarantee your entry to New Zealand even if you are accepted to attend Via.

10a	Main contact address (where we will send all mail concerning your application)		10b	Alternative address (if relevant)
	Street no. & name	<input type="text"/>		<input type="text"/>
	Suburb	<input type="text"/>		<input type="text"/>
	City/Town	<input type="text"/>		<input type="text"/>
	Postal/Zip Code	<input type="text"/>		<input type="text"/>
	Country	<input type="text"/>		<input type="text"/>
	Emergency contact name	<input type="text"/>		<input type="text"/>
	Telephone (including country code)	<input type="text"/>		<input type="text"/>
	Mobile	<input type="text"/>		<input type="text"/>
	Hours most suitable to call (in GMT)	<input type="text"/>		<input type="text"/>
	Email address	<input type="text"/>		<input type="text"/>

Privacy statement: Your details will be kept securely and will not be used for any purposes other than your application for Via and subsequent enrolment. We will need to supply them to other institutions for the purpose of processing your application. You may request the removal of your details from our database at any point if your application does not proceed.

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programme details

11a Which programme are you applying to attend? Circle choice 3 6 12 weeks

11b If this programme is not available, would the subsequent one be acceptable? Yes No Other
We will contact you as soon as possible if this requirement becomes apparent

12 Do you plan to travel to New Zealand in advance or remain after the course? Yes No
(For NZ Immigration Service purposes – if so we will contact you if necessary to establish details)

13a How did you hear about Via? Family Friend School Media item Website Other

13b Please provide name/details

14a Which of the following have you personally experienced (or will have)?
Life studies Career counselling Life coaching Personal training

14b Please provide details:

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dietary and health requirements



All this information is confidential and will not be shared with other parties. It will help us to better tailor our services to your needs and ensure your stay is safe and enjoyable as possible.

26 Do you have any dietary requirements/allergies?

27 Do you live with the effects of disability, injury, deafness, blindness or long term illness Yes No

27a If Yes, please provide details so we can best assist you

27b If Yes, would you require physical assistance to evacuate a building in an emergency Yes No

28 Some of the Adventure Activities we offer require a good level of physical fitness. All these activities are optional, but it would help our planning and enable us to offer you alternatives if you advise us of any restrictions you may have or activities you would not wish to participate in:

29 Do you take any regular prescription medicine – if Yes, please provide details Yes No

30 In the case of a medical emergency we may need to contact your family doctor/GP. Please provide their details below:

Name	Telephone
Address	
Next of kin	
Address	

31 We require all our guests to have personal health insurance to ensure you receive the best treatment if necessary. This is true for most visitors to New Zealand anyway. If you already have a policy in place please provide details below. If not, it is a condition of your attendance that you have adequate cover to meet New Zealand's health system (ACC) requirements.

Company	Policy number:
Telephone	

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payment, cancellation and refund policy



Payment, cancellation and refund policy

- : If Via cancel a course, all fees will be refunded in full.
- : To reserve your place at Via we require a 20% deposit to be paid upon acceptance. We then require full payment to be received sixty days before the programme starts to confirm your enrolment.
- : If you formally cancel your enrolment sixty days prior to the programme starting you will receive a 90% refund of the full fee paid, or forfeit half the deposit paid to reserve a place.
- : If you formally cancel your enrolment within sixty days, but more than ten days prior to the programme starting you will receive a 50% refund of the full fee paid. This will be increased to 90% as above if we are able to fill your place at short notice and the programme is fully booked upon commencement.
- : If you fail to secure your place by making full payment and your place is taken by somebody else we will refund 50% of the deposit paid, the balance being an administration fee.
- : If you formally cancel your enrolment within ten days of the programme starting, or fail to inform us you will not attend the fee payable is forfeit.
- : In the event of exceptional circumstances we will attempt to reduce these cancellation fees upon application.



declaration :



- a I agree to abide by the laws and regulations of Via and of New Zealand at all times.
- b I have familiarised myself with the regulations and policy of Via as set out on the website www.via-nz.com or from the copy that I have requested.
- c I am aware that attendance of the Via programme requires that I am granted entry to the country by the NZ Immigration Service and that I hold personal health insurance for the duration of my stay.
- d I acknowledge that if I am accepted for a programme I am liable for the fees payable (including any late fee or debt collection fee) until such time as I have paid.
- e I authorise any agency or individual holding the source of any information I have provided to release that information to Via upon request and to discuss my application in confidence.
- f I agree that it is an essential term of this application that the information I have supplied is true and complete and I acknowledge that my application will be suspended if false information has been supplied.
- g I acknowledge that this application form in no way constitutes a binding agreement between me and Via NZ Limited. By submitting this application form I register my interest in participating in the Via programme and I acknowledge that Via has sole discretion as to whether or not to accept my application.

Signed	Date
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If you are under 18 or are not making payment yourself, your parent, guardian or sponsor must sign below also.

I, (name)

acknowledge as parent/guardian/sponsor (delete as appropriate) of

(applicant's name)

that I understand and accept the above terms.

Signed	Date
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If you require assistance in completing this form, please contact the

Programme Manager
Ph: + 64 9 302 5000
Fax: + 64 9 302 5010
Email: info@via-nz.com

Please send this completed application form with photograph attached to:
Via New Zealand Limited, P O Box 91 261, Auckland 1030, New Zealand