## AMERICAN FLYERS HOUSTON INTERNATIONAL ENROLLMENT FORM

Name: (First)	(Middle)		(Last)
International Address (REQUIRED):			
US Address (IF UNKNOWN, PLEASE LIST SCHOOL ADDRESS):			
Telephone: Emergency Name:		Email:	
Teleph			
I will be enrolling in the following course(s): (CHECK ALL THAT APPLY)			
Private Pilot Airplane Instrument Rating Airplane Commercial Pilot Airplane			
Career Course (Private, Instrument, Commercial) Certified Flight Instructor Multi-Engine Airplane			
I require student housing: Yes No			
I plan to arrive in the US on: (Month/Day/Year)	Local T	ime (HH:mm):	I plan to depart the US on: (Month/Day/Year)
I plan on starting the training program on: (Month/Day/Year) Local Time (HH:mm):			
I plan to completing the training program on: (Month/Day/Year)			
I understand it is mandatory to be covered by health insurance for the duration of my stay in the United States			
I am already covered by a policy that will apply in the US and will supply a copy			
I will arrange insurance through the school on arrival Please send details of insurance			
FOR THOSE REQUIRING A STUDENT VISA			
Date of Birth (Month/Day/Year): City and Country of Birth:			
Citizenship: Permanent Resident of:			lent of:
Occupation:			
Pilot Ratings held, if any:			
Briefly describe why you wish to become a pilot:			
NOTE: A TUITION DEPOSIT AND A COPY OF A VALID PASSPORT IS			
-	JIRED BEFOR		N BE PROCESSED
Signature of Applicant:			nature of Parent or Guardian red if applicant is under 18)
Payments can be made by wire transfer, travelers checks, personal of company checks (drawn on US banks)			
Please use all of the following information for wire transfer of funds: Bank of America			
Bank of America Bank Address: 100 West 33rd Street, New York, NY 10001   Account Name: American Flyers, Inc.			
Domestic Wire: Account number - 004810799031 / Routing number -0260-0959-3			
			umber - BOFAUS3N / Chips Address: 0959
In order to assure credit to the proper account please indicate on deposit the <i>full name of the STUDENT that will be training</i>			
PLEASE RETURN THIS FORM VIA EMAIL OR POSTAL MAIL TO:			
American Flyers (Admissions) 20803 Stuebner Airline Road			
Spring, TX 77379 USA			
Telephone: 281-655-4500 Email: dwh@af.tv (please use link above)			
			TS WILL BE REFUNDED IN FULL
LESS A \$360 FEE UPON RETURN OF THE UNUSED I-20 FORM			