AMERICAN FLYERS POMPANO BEACH INTERNATIONAL ENROLLMENT FORM

Name: (First)	(Middle)		(Last)	
International Address (REQUIRED):				
US Address (IF UNKNOWN, PLEASE LIST SCHOOL ADDRESS):				
Telephone: Emerg	gency Name: none:		Email:	
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	Time (HH:mm):	I plan to de	epart 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:		
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				
REQUIRED BEFORE THE I-20 CAN BE PROCESSED				
Signature of Applicant:			Signature of Parent or Guardian (required 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 Address: 100 West 33rd Street, New York, NY 10001 Account Name: American Flyers, Inc.				

Domestic Wire: Account number - 004810799031 / Routing number - 0260-0959-3

International Wire: Account number - 004810799031 / Swift number - BOFAUS3N / Chips Address: 0959

In order to assure credit to the proper account please indicate on deposit the full name of the STUDENT that will be training

PLEASE RETURN THIS FORM VIA EMAIL OR POSTAL MAIL TO:

American Flyers (Admissions) 801 NE 10th. Street Pompano Beach, FL 33060 USA

Telephone: 954-785-1450 Email: info@americanflyers.com (please use link above)

NOTE: M-1 VISA STUDENTS – TUITION DEPOSITS WILL BE REFUNDED IN FULL LESS A \$360 FEE UPON RETURN OF THE UNUSED I-20 FORM