

VFA SUMMER/WINTER ESL PROGRAM FOR TEENAGERS

2024



VFA
High School

VFA HIGH SCHOOL
5621 KILLARNEY STREET
VANCOUVER, BC, CANADA
V5R 3W4
TEL: 604-436-2332
E-MAIL: INFO@VFA.BC.CA
WEBSITE: WWW.VFA.BC.CA



Welcome to Our School

VFA

Vancouver Formosa Academy offers special full-time summer and winter ESL programs for international students who would like to improve their English skills and enjoy activities in Vancouver.

Learning with Fun

English Language Classes

Reading, Grammar, Writing,
Listening, Speaking, Pronunciation

Academic Preparation Classes

Canadian Cultural Studies, Computer Skills

Special Activities and Fieldtrips *- May include

Stanley Park	Gastown
Vancouver Aquarium	Science World
Granville Island	Ice Skating
University of British Columbia	Canada Place
Fraser River Discovery Centre	Sports Day
BC Sports Hall of Fame	Picnics
Burnaby Village Museum	Holiday Parties

Activity fees and public transit fare for fieldtrips are included in tuition



WEEK SCHEDULE

PROGRAM FEES AND REGISTRATION FOR WINTER AND SUMMER 2024

Winter January-March 2024

Week 1: Jan. 8-12
Week 2: Jan. 15-19
Week 3: Jan. 22-26
Week 4: Jan. 29-Feb. 2
Week 5: Feb. 5-9
Week 6: Feb. 12-15
Week 7: Feb. 20-23
Week 8: Feb. 26-Mar.1

No class on Feb.16 (Pro D Day)
and Feb. 19th (Family Day)

Summer July-August 2024

Week 1: July 2-5
Week 2: July 8-12
Week 3: July 15-19
Week 4: July 22-26
Week 5: July 30-August 2
Week 6: August 6-9

No class on July 1st (Canada Day)
and August 5th (B.C. Day)





PROGRAM FEES

Application Fee	\$150
Tuition Fee	
2 Weeks	\$1,200
3 Weeks	\$1,680
4 Weeks	\$2,100
5 Weeks	\$2,250
6 Weeks	\$2,940
7 Weeks	\$3,360
8 Weeks	\$3,780

Notes:

@2 weeks minimum registration required
@2nd , 3rd family member – 5% discount on tuition

@A special fee schedule for immigrants is available upon request.

Homestay

Arrangement	\$300
Room & Board	\$350 per week

Homestay available for students age 13 and over.

Program availability and dates may be dependent on enrollment.

REGISTRATION AND PAYMENT DEADLINES

Register in person, by email, or via internet.

Space is limited. Full payment is required to ensure a space.

Registration Deadline: 3 weeks before class start date.

Medical Insurance

All students must be covered by medical insurance. Proof of health insurance must be presented by start date.

Clothing

A casual dress code will be enforced. Please see regulations upon registration.

Life at

VFA

Connect with

VFA

HOW TO APPLY



COMPLETE THE REGISTRATION FORM



COMPLETE THE HOMESTAY APPLICATION FORM, IF REQUIRED



COMPLETE THE CONSENT AND RELEASE FORM



SEND IN THE APPLICATION



EMAIL TO REGISTRAR@VFA.BC.CA

Include the following -

- a) Completed and signed forms
- b) A copy of the student's passport identity page
- c) Fees

PAYMENT METHOD

Payment of the fees should be in Canadian dollars.

Please inform the bank that VFA should receive the full invoiced amount after deduction of relevant bank fees. Bank fees are to be added on top of the invoice total.

@ Cash

paid at school

@ Personal Cheque or Bank Draft

Payable to Vancouver Formosa Academy

@ Credit Card

(Completed attached form with a 3.5% bank charge applies)

@ E-transfer

by request prior to the payment

@ Wire Transfer:

Account Name: Vancouver Formosa Academy

Address: 5621 Killarney Street
Vancouver, BC, Canada V5R 3W4

Account Number: 124-162-9

Bank Name: Royal Bank of Canada,
Oakridge Branch

650 West 41st Avenue

Vancouver, BC, Canada V5Z 2M9

Bank Number: 003

Transit Number: 07360

Swift Code: ROYCCAT2



2024 SUMMER/WINTER
ESL PROGRAM
FOR TEENAGERS

SEND THE COMPLETED APPLICATION
BY EMAIL TO REGISTRAR@VFA.BC.CA

REGISTRATION FORM

WEEKS ATTENDING-WINTER 2024

- WEEK 1 : JAN. 9 - 13 WEEK 2 : JAN. 16-20 WEEK 3 : JAN. 23-27 WEEK 4 : JAN. 30-FEB. 3
 WEEK 5 : FEB. 6-10 WEEK 6 : FEB. 13-16 WEEK 7 : FEB. 21-24 WEEK 8 : FEB. 27-MAR. 3

WEEKS ATTENDING -SUMMER 2024

- WEEK 1 : JULY 2- 5 WEEK 2 : JULY 8-12 WEEK 3 : JULY 15-19
 WEEK 4 : JULY 22-26 WEEK 5 : JULY 29-AUG 2 WEEK 6 : AUG 6-9

STUDENT INFORMATION

LAST/FAMILY NAME: _____ FIRST NAME: _____

BIRTH DATE (MM/DD/YYYY): _____ SEX: MALE FEMALE

SCHOOL CURRENTLY ATTENDING: _____ GRADE: _____

ENGLISH STUDIES: LESS THAN 2 YEARS 2-4 YEARS 5 YEARS

HOBBIES: _____

ALLERGIES OR MEDICAL PROBLEMS: _____

HOMESTAY REQUIRED? YES NO

CONTACT INFORMATION

NAME OF PARENT/ GUARDIAN (CHECK ONE) : _____

TEL: _____ EMAIL: _____

LOCAL CONTACT NAME: _____ RELATIONSHIP: _____

ADDRESS: _____

LOCAL TEL: _____ EMAIL: _____

SIGNATURE OF PARENT/GUARDIAN: _____ DATE: _____

(OR TYPE NAME)

(MM/DD/YY)

HOMESTAY APPLICATION FORM

STUDENT INFORMATION

LAST/FAMILY NAME: _____ FIRST NAME: _____

AGE: _____ SEX: MALE FEMALE NATIVE LANGUAGE: _____

STATE OF HEALTH: VERY GOOD GOOD FAIR POOR

HEALTH PROBLEM/ DETAILS: _____

DO YOU HAVE ANY ALLERGIES? NO

YES/ DETAILS: _____

ARE THERE ANY FOODS YOU CAN'T OR WON'T EAT? NO

YES/ DETAILS: _____

ARE YOU ALLERGIC TO PETS? NO

YES/ DETAILS: _____

ARE YOU COMFORTABLE LIVING WITH PETS? YES

NO/ DETAILS: _____

HOMESTAY FAMILY PREFERENCE

FAMILY WITH CHILDREN OVER 12 FAMILY WITH CHILDREN UNDER 12

ADULT HOMESTAY (NO CHILDREN) ANY HOMESTAY IS OK

NOTE:

AIRPORT NOT REQUIRED

PICK-UP REQUIRED (PLEASE NOTIFY THE SCHOOL WITH YOUR FLIGHT SCHEDULE AT LEAST 1 WEEK PRIOR)

I ACKNOWLEDGE THAT I UNDERSTAND AND AGREE TO FOLLOW THE POLICIES AND REGULATIONS OF
THE VANCOUVER FORMOSA ACADEMY ACCOMMODATION SERVICE.

STUDENT'S SIGNATURE: _____ DATE: _____

SIGNATURE OF PARENT/GUARDIAN: _____ DATE: _____

(OR TYPE NAME)

(MM/DD/YY)

CONSENT AND RELEASE FORM

I, AS THE PARENT/ GUARDIAN OF _____ (NAME OF THE STUDENT),

HEREBY GIVE VANCOUVER FORMOSA ACADEMY ("VFA HIGH SCHOOL") CONSENT TO THE FOLLOWING:

CONSENT FOR PARTICIPATION IN SCHOOL ACTIVITIES

I HEREBY CONSENT TO THE PARTICIPATION OF THIS STUDENT IN ACTIVITIES CONDUCTED WITHIN THE CURRICULUM OF YOUR SCHOOL DURING OR AFTER THE REGULAR SCHOOL HOURS ON SCHOOL PREMISES, OR ELSEWHERE, PROVIDED REASONABLE SUPERVISION IS GIVEN BY A MEMBER OF YOUR STAFF.

I RELEASE VFA HIGH SCHOOL FROM ANY CLAIMS OR DAMAGES FOR LOSS, INJURY OR DAMAGE TO THIS STUDENT OR HIS/HER PROPERTY WHILE PARTICIPATING IN ANY VFA HIGH SCHOOL ACTIVITY OR ATTENDING SCHOOL.

THIS CONSENT SHALL BE VALID UNTIL REVOKED AND COVERS, WITH THE EXCEPTIONS NOTED BELOW, ALL ACTIVITIES INCLUDING PARTICIPATION IN GAMES, ATHLETIC SPORTS OR FIELD TRIPS CONDUCTED AS A PART OF THE CURRICULUM.

THIS CONSENT DOES NOT INCLUDE PARTICIPATION IN: _____

STUDENT MEDIA CONSENT AND RELEASE

THROUGHOUT THE SCHOOL YEARS, STUDENTS MAY BE HIGHLIGHTED IN EFFORT TO PROMOTE VFA HIGH SCHOOL ACTIVITIES AND PROGRAMS. FOR EXAMPLE, STUDENTS MAY BE FEATURED IN MATERIALS TO INCREASE AWARENESS OF OUR SCHOOL THROUGH NEWSPAPERS, THE WEBSITES, DISPLAYS, BROCHURES, AND OTHER TYPES OF MEDIA.

I HEREBY GIVE VFA HIGH SCHOOL PERMISSION TO PRINT, PHOTOGRAPH, AND RECORD MY CHILD FOR USE IN AUDIO, VIDEO, FILM, OR ANY OTHER ELECTRONIC, DIGITAL AND PRINTED MEDIA.

I FURTHER RELEASE VFA HIGH SCHOOL FROM ANY LIABILITIES, KNOWN OR UNKNOWN, ARISING OUT OF THE USE OF THIS MATERIAL.

I CERTIFY THAT I HAVE READ THE CONSENT AND RELEASE FORM AND FULLY UNDERSTAND ITS TERMS AND CONDITIONS.

NAME OF PARENT/ GUARDIAN (CHECK ONE) :

_____ (PRINT NAME)_

SIGNATURE OF PARENT/GUARDIAN: _____ DATE: _____
(OR TYPE NAME) (MM/DD/YY)

CREDIT CARD AUTHORIZATION FORM

REQUIRED INFORMATION

STUDENT'S LAST/FAMILY NAME: _____ FIRST NAME: _____

AMOUNT \$ _____ +3.5% BANK CHARGE

CREDIT CARD TYPE VISA MASTER CARD

NAME ON CARD _____

CARD NUMBER _____

EXPIRY DATE _____

CARD SECURITY CODE (3 OR 4 DIGIT NUMBER ON THE BACK OR FRONT OF YOUR CARD) _____

INSTRUCTIONS

- THE NAME ON THE CREDIT CARD MUST MATCH THE NAME OF THE PERSON AUTHORIZING CHARGES.
- YOU MUST INCLUDE A COPY OF THE ABOVE MENTIONED CREDIT CARD (BOTH FRONT AND BACK)
- RETURN 1) THE COMPLETED AND SIGNED AUTHORIZATION AND 2) A COPY OF YOUR CREDIT CARD BY EMAIL TO REGISTRAR@VFA.BC.CA.

CARD HOLDER'S SIGNATURE

I, _____ (PLEASE PRINT) AUTHORIZE
VANCOUVER FORMOSA ACADEMY TO CHARGE THE ABOVE CREDIT CARD FOR THE ABOVE-SPECIFIED
AMOUNT.

SIGNATURE (OR TYPE NAME)

DATE(MM/DD/YYYY)