

STUDENT ENROLMENT CONTRACT 2025

COLLEGE						New Reg	gistration	Extensio	n Upgrade	
STUDENT INFORM	MATION									
Last Name(s):			First	First and Middle Name(s):						
Usual First Name / Nickname (if applicable):			Birth	Birthday (yyyy/mm/dd): Gender: Female Male Non-Binary						
Nationality:			Citize	Citizenship:						
Student Email Address:			Stud	lent Phone	Number:					
Agency name (if applicable):				Visa Type: Student Visa Visitor Visa/ETA Working Holiday Visa Other						
Home Country Mailing A	Address		Maili	ing Addre	ss in British Colum	bia				
Street Address:			Stree	Street Address:						
City:			City:	City:						
Province:				Province: British Columbia						
Country:				Country: Canada						
Postal Code:				Postal Code:						
				Personal Canadian Phone Number:						
For applicants applying within Canada who require a Study Permit, please indicate whether you currently hold a Study Permit from another DLI in Canada: *Please note: In most cases you will be required to apply to extend your Study Permit. For more information visit: * No https://www.canada.ca/en/immigration-refugees-citizenship/services/study-canada/change-schools.html*										
EMERGENCY CONTACT INFORMATION										
Contact Full Name:				Relationship:						
Email Address:				Phone Number:						
PROGRAM INFOR	MATION Select the pro	gram(s) you want	to register	for and pr	ovide the start and	end date(s) an	d duration i	n weeks		
School of English Language Sch			School of	ool of International Business						
				Diploma Diploma + Co-Op Executive Certificate Four Week Certificate Two Week Certificate Afternoon Plus Class						
Start Date: (yyyy/mm/dd)	End Date: (yyyy/mm/dd)	Duration: (in weeks)			Start Date: (yyyy/mm/dd)	End D		Duration: (in weeks)		
Are you interested in VGC's University Pathway Program? Yes No Undecided If yes, which institution:										
PROGRAM ADMISSION REQUIREMENTS										
be the appropriate age a	ements for each VGC progr and be able to prove that th (Program admission requi	iey can study lega	lly in Canad	da on thei	r first day at VGC. S	tudents must a				
MEDICAL INSURANCE Note: It is mandatory to have medical insurance whether it is through VGC or not.										
Would you like to purchase medical insurance from VGC? (\$21/ week, minimum two weeks - non-refundable): Yes No										
PRIVACY										
with the Registrar's regu	nder section 61 of the Priv latory duties under that Ac C filing and student inform	t. Accordingly, this	s institution	n is author	ized to disclose yo	ur personal info	rmation to	the Registr	ar for	

VGC is designated by the Private Training Institutions Regulatory Unit (PTIRU)

TERMS AND CONDITIONS (General Rules, Student Activity Release & Indemnity Form, and Photo Release Form)

In order to attend classes and activities, students and their parent/legal guardian (if applicable) must sign the following information.

GENERAL RULES

Students are expected to obey all Canadian laws and policies. These rules apply to all students while they are in British Columbia and VGC (school, activities and accommodation).

No Alcohol: In the province of British Columbia, the legal drinking age is 19. If a minor student is caught drinking, under the influence, or in possession of alcohol, the authorities (police) can be notified, as well as the student's parents. Depending on the severity, the minor may be sent back to their home country. It is also illegal to buy alcohol for anyone who is under 19.

No Tobacco: In the province of British Columbia, the legal age for buying tobacco products is 19. It is illegal to buy cigarettes for anyone who is under 19. **No Drugs:** Drugs are not tolerated and are taken very seriously in Canada. Police will be contacted if students are caught using, under the influence, or in possession of any illegal drugs. Students may be fined, arrested, or deported by legal authorities.

No Marijuana: In the province of British Columbia, the legal age for buying marijuana products is 19. VGC does not tolerate any students to be in possession, or be under the influence of marijuana at VGC, on activities, in VGC accommodation and during the Co-Op placement.

No Fake Identification: If a minor student is caught in possession of a fake I.D., the student's parents and the authorities will be notified immediately and the minor will be sent back to their home country. Fraud is illegal in Canada.

Initial (Mandatory):

STUDENT ACTIVITY RELEASE & INDEMNITY FORM

Please accept my application to participate in any or all activities provided by VGC International College, hereinafter referred to as the ("School"), as described in the school brochures or other materials, or as may be offered from time to time, by the School, its employees or representatives ("School Activities"). For good and valuable consideration, the receipt and sufficiency of which is acknowledged, the undersigned student (or legal guardian on behalf of the student is under 19), hereby agrees as follows:

- 1. That many of the School Activities require a certain degree of skill and physical fitness and that participating in such activities exposes me to certain risks of accident or injury.
- 2. That by signing below I waive any and all claims that I have or may have in the future against the School, its employees, and representatives. This does not include any claims as a result of wrongful, negligent or unauthorized act or omission on part of the school or its employees.
- 3. I hereby release the School, its employees, and representatives from any and all liability for any loss, damage, expense, personal injury or death, that I may suffer, or that my heirs, next of kin, executors, administrators, families or representatives may suffer as a result of any cause, condition or event whatsoever beyond the direct control of the School.
- 4. This Waiver shall be effective and binding upon my heirs, next of kin, executors, administrators, families or representatives in the event of my death or incapacity.
- 5. This Waiver shall be governed by and interpreted in accordance with the laws of the Province of British Columbia.

In entering into this Waiver, I am not relying upon any oral or written statements made by the School or its employees or representatives other than as written in this Waiver. I have read and fully understand this Waiver and I am aware that by signing I am waiving certain legal rights which I or my family, next of kin, executors, administrators, families or representatives may have against the School or its employees or representatives.

Initial (Mandatory):

PHOTO RELEASE FORM

I hereby grant to VGC International College and its affiliates (the "School"), the right to reproduce, use, exhibit, display, broadcast, distribute and create derivative works of photographic images of me, which may be taken during my attendance at the School, for use in connection with the activities of the School or for promoting, publicizing or explaining the School or its activities.

This grant includes, without limitation, the right to publish such images in the School's PR/ promotional materials, such as social media, marketing admissions publications, advertisements, fund-raising materials, and any other School-related publications. These images may appear in any of the wide variety of formats and media now available to the School and that may be available in the future, including but not limited to print, broadcast, videotape, CD-ROM, websites, podcasts and other electronic/online media.

I hereby waive any right to inspect or approve the finished photographs or printed or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the photograph.

I hereby agree to release, defend, and hold harmless the School and its agents or employees, including any firm publishing and/or distributing the finished product in whole or in part, whether on paper or via electronic media, from and against any claims, damages or liability arising from or related to the use of the photographs or video footage, including but not limited to any misuse, distortion, blurring, alteration, optical illusion or use in composite form, either intentionally or otherwise, that may occur or be produced in taking, processing, reduction or production of the finished product, its publication or distribution.

Initial (Optional):

PAYMENT PLAN

Please send VGC the non-refundable registration fee and a \$2,000 deposit. When payment is received, VGC will provide you with a Letter of Acceptance. If your contract is longer than six months, you have the option of paying in full or paying the first half of your tuition before classes begin and then pay the remaining tuition halfway through your program.

Notes: • If your contract is less than six months, you must pay all of your tuition before the start of classes.

• The payment types that are accepted at VGC are: Wire Transfers, Debit Cards, Credit Cards, Cheques and Cash.

VGC POLICIES AND PROGRAM OUTLINES

Program Outlines: For your reference, all of VGC's Program Outlines can be found in each program section on the VGC website. In addition to the website, the program outline for the program registered will be attached to this contract and sent to you.

It is mandatory to read the Tuition Refund Policy as well as the policies listed below before signing this contract.

- Statement of Student Rights Policy
- Student Attendance Policy Student Dismissal Policy
- Respectful and Fair Treatment of Students Policy Dispute Resolution Policy Student Grade Appeal Policy Work Experience Policy (if applicable) These policies, including additional VGC policies, can be found on the VGC website at: www.VGC.ca/policies/

TERMS AND CONDITIONS DECLARATION

I agree to the terms set out in the General Rules and Student Activity Release & Indemnity Form. I understand that if I break VGC's general rules, there will be consequences which could lead to being dismissed from VGC International College and (if applicable) VGC accommodation.

I have provided my initials stating whether or not I agree to the teri	ms in the Photo Release Form section.
Printed Student Name:	Printed Parent/ Legal Guardian Name:
Student's Signature:	Signature of Parent/ Legal Guardian:
Date Signed (yyyy/mm/dd):	Date Signed (yyyy/mm/dd):
STUDENT DECLARATION	
 statistical analysis under the authority of sections 6(2)(a) and Should you have any questions about the collection, disclosur Certification, Private Training Institutions Regulatory Unit, Syst Education and Future Skills, 310-601 Cordova Street W, Vanco 	re and use of personal information you may contact: Director, Policy and Institution tem Integrity Branch, Post-Secondary Policy & Programs, Ministry of Post-Secondary puver, BC V6B 1G1 or by telephone at (604 569-0019). Digration, Refugees and Citizenship Canada for the purposes of the International Student
Printed Student Name:	Printed Parent/ Legal Guardian Name:
Student's Signature:	Signature of Parent/ Legal Guardian:
Date Signed (yyyy/mm/dd):	Date Signed (www/mm/dd):



ACCOMMODATION CONTRACT 2025

COLLEGE	Do you war	nt to register for: Homestay OR	VGC Residence OR No Accommodation					
STUDENT INFORMATION								
Last Name(s):	First a	First and Middle Name(s):						
Nationality:	Birtho	lay (yyyy/mm/dd): Gen	der: Female Male Non-Binary					
How would you describe your persor	nality? (example: shy, outgoing, organized	d, etc) And what kind of activities are	you interested in?					
HOMESTAY INFORMATION								
Homestay Type: Single Room + 1Shared rooms cannot be shared with	3 meals Single Room + 2 meals O strangers, must be with a friend or signific		Shared Room ¹ + 2 meals					
Additional Information:	Do you have any allergies? Do you have a special diet? ² No Do you smoke? No	Yes, details: Yes, details: Yes ² Possibility that there will be a	dditional charges for special diet. See Pricelist.					
Are you comfortable with:	Cats? Yes No No Preferen Dogs? Yes No No Preferen	3	No No Preference No No Preference					
Do you have any special requests?:								
Expected Period of Homestay:	Number of Weeks: Check-in Date (yyyy/mm/dd):	Number of Extra Days: Check-out Date (yyyy/mm/dd):						
Do you require Airport Pick-up? Addit	tional fee. See Pricelist: Yes No	Do you require Airport Drop-off? A	dditional fee. See Pricelist: Yes No					
Do you require the Unaccompanied Minor Service (UM)? Yes No Additional fee. See Pricelist Do you require a Custodian Letter? (Are you 18 and under?) Yes Additional fee. See Pricelist								
Notes: • \$35/week surcharge during summer months (May – September). • WGC cannot guarantee all of your preferences and special requests. • An additional \$20/week will apply for students who are 18 or under.								
HOMESTAY RULES								
 In addition to the "Homestay Guidelines, Rules and Policies" document, found on the VGC website at: www.VGC.ca/policies/, it is important for all students to understand and adhere to the following rules. Sleepovers and parties are not permitted on the premises of the host family's home. Students must notify their homestay family in advance if they will not be home by dinner. Minor students must inform their homestay family where they will be and what time they will be home. If the homestay family invites a minor student to go for a trip or an activity, the student must inform VGC. Students under VGC Custodianship cannot cancel homestay with VGC. 								
VGC HOMESTAY DECLARAT	ON							
	Homestay Guidelines and Policies docum to the homestay rules for 18 and under,		w.VGC.ca/policies/ and the homestay rules					
Student's Signature:		Signature of Parent or Legal Guardian:((If 18 and under)						
Date Signed (yyyy/mm/dd):		Date Signed (yyyy/mm/dd):						
VGC RESIDENCE INFORMAT	ION (19 YEARS AND OLDER)							
a. Contact VGC for room availability. If your request is not available, VGC will provide other options and dates. b. In order to guarantee a booking, students must pay the placement fee, rent for four weeks, damage deposit, and the amenities fee.								
Shared Residence Type: Shared	Room Shared Room with Ensuite Priv	vate Room Private Residence Type	Private Apartment					
Residence Location:		Do you smoke? Yes No						
Number of Weeks in Residence:	Number of Extra Days:	Start Date (yyyy/mm/dd): End Date (yyyy/mm/dd):						
Do you require airport pick-up? Addit	tional fee. See Pricelist: Yes No	Do you require airport drop-off? Additional fee. See Pricelist: Yes No						
VGC RESIDENCE DECLARATION								
By registering for the residence, you agree to the Policies and Regulations on the website: www.VGC.ca/policies/								
Student's Signature:		Date Signed (yyyy/mm/dd):						