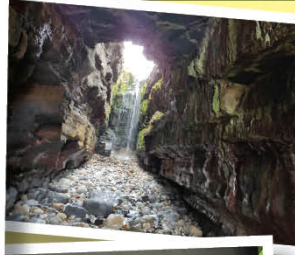


# Coláiste Gaeilge Chill Chartha

(Kilcar), Co. Dhún na nGall



## CÚRSAÍ SAMHRAIDH 2023

Dátaí

### Summer Courses

Cúrsa A: 2/07/23 - 9/07/23

Cúrsa B: 9/07/23 - 23/07/23

\* Two week courses also available

- Béim ar labhairt na Gaeilge
- Special rate available for families and groups
- Emphasis on spoken Irish



## CÚRSAÍ IDIRBHLIANA 2023

Dátaí

### Transition Year Courses

Cúrsa C 1/05/23 - 5/05/23

Cúrsa D 8/05/23 - 12/05/23



Webpage [www.colaistechara.com](http://www.colaistechara.com)  
Email [colaistechara@gmail.com](mailto:colaistechara@gmail.com)  
Phone 086 1556 035/ 087 7084 700



An Clachán

## FOIRM IARRATAIS / APPLICATION FORM

1.	Ainm / Name:	Aois / Age
2.	Seoladh / Address:	
3.	<b>CURSAÍ SAMHRAIDH - SUMMER COURSES</b> <b>A:</b> 2/7/23 – 9/7/23    €280 <input type="checkbox"/> <b>B:</b> 9/7/23 – 23/7/23    €525 <input type="checkbox"/>	
4.	<b>IDIRBHLIAIN / TY YEAR</b> <b>C:</b> 1/5/23 – 5/5/23    €195 <input type="checkbox"/> <b>D:</b> 7/05/23 – 12/05/23    €195 <input type="checkbox"/>	
5.	Male <input type="checkbox"/> / Female <input type="checkbox"/>	Date of Birth
7.	Parents'/Guardian's mobile:	
	Email address:	
8.	Has the student any health problems? Please attach all relevant details <span style="float: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span>	
9.	I authorise the college to allow my child to take paracetamol under supervision if required. <span style="float: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span>	
10.	Dietary requirements: No special needs <input type="checkbox"/> Coeliac <input type="checkbox"/> Vegetarian <input type="checkbox"/> Nut allergy <input type="checkbox"/> Other <input type="checkbox"/> If other, please specify:	
11.	Name and telephone no. of person who will accept responsibility of above student in parents/guardians' absence.	
	Name:	Mobile:
12.	Name of <u>one</u> friend you wish to be accommodated with:	
13.	Please visit <b>www.colaistechara.com</b> and read our application process and terms and conditions. Please tick to accept: 1. Terms and conditions <input type="checkbox"/> 2. Code of behavior <input type="checkbox"/> 3. Permission to film <input type="checkbox"/> Students may have their image used for promotional material, brochures, fb, if acceptable tick box <input type="checkbox"/>	
	Student	
	Parent	Date

Please forward the completed form and a deposit of €100 to address below or pay through a bank

### Coláiste Chara

**IBAN:** IE07 AIBK9373 0428 165005

**BIC:** AIBKIE2D

### Cheques / Bank Drafts / Postal Orders made payable to:

Coláiste Chara, Chill Chartha, Co. Dhún na nGall

DPC t. (074) 9121710



Supported by the Department of Rural & Community Development

Rialtas na hÉireann  
Government of Ireland



**Comhairle Contae  
Dhún na nGall**  
Donegal County Council



**BÉAL AN PHOBAIL**

Tionscnamh pleanála teanga  
Icthais Shliabh T. 1.99