

## BIHC ACCOMMODATION REQUEST FORM

### TO BE FILLED IN BY PROSPECTIVE STUDENT

Title (Ms/Mrs/Mr): \_\_\_\_\_

Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Personal Cell No: \_\_\_\_\_ Parent/Guardian's No: \_\_\_\_\_

Email address: \_\_\_\_\_

Check-In Date: \_\_\_\_\_

Check-Out Date: \_\_\_\_\_

Date of Enquiry: \_\_\_\_\_

### TO BE FILLED OUT BY BIHC:

Potential student received:  Fees Structure  Regulations Handbook  Residence Tour

Comments/follow-up: \_\_\_\_\_

BIHC Representative:  
\_\_\_\_\_