

	Name	First name	Date of birth
Participant 1			
Participant 2			
Participant 3			

Name /first name of one of the parents .....

Street, number ..... Postal code, city .....

Phone (home) ..... Mobile .....

Phone (work) ..... E-mail .....

Accident insurance of the participant .....

Disease: does your child suffer from a disease, an allergy or particular handicap? Does he have to take a specific medicine during the camp ?  
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Group lesson :  ski  snowboard  cross-country & snowshoeing

Ski level :  beginner (never skied before)  beginner (already skied before, green pist)  
 snowplough (blue pist)  parallel (red pist)  expert (black pist)

Snowboard level :  beginner  intermediate  advanced

By my signature, I guarantee that my child is to the advantage of an accident insurance and REGA member. I give evidence that my child has the authorization to participate in the skiing week St-Cergue 1+ organized by ESI La Dôle Ski School which will take place of :

..... to .....

Play attention, my registraton is valid only at reception of the week's amount or CHF 490.- and guaranteed me a place to the week. I noted the name of my child and dates of the week in the compartment "communication" of e-banking or post paiement form. I authorize Progression to publish photos and video of the week for the internet site's gallery and the brochure of the School

- To book a week for your child , you must return by post :**
- 1. BOOKING FORM**
  - 2. E-BANKING PAYMENT FORM OR POST PAYMENT FORM**
  - 3. ACCIDENT & RESCUE INSURANCE CARD COPY**

<p><u>TO SEND US TO :</u></p> <p>Alan Delizée Ski and Snowboard School Boîte postale 252 La Bouriaz CH-1265 La Cure</p> <p><u>OU PAR E-MAIL :</u> info@esi-dole.ch</p>	<p><u>E-BANKING /E-FINANCE :</u></p> <p><b>Bénéficiaire : ALAN DELIZEE</b> <b>La Bouriaz 22 1265 La Cure</b> Banque du bénéficiaire : UBS SA Case Postale 1002 Lausanne IBAN CH690024324345789341Z N°clearing 243 BIC :UBSWCHZH80A</p>	<p><u>BY POST :</u></p> <p>Versement pour : UBS SA Zurich ALAN DELIZEE 457893.41Z Compte : 80-2-2</p> <p><u>TWINT :</u></p> <p>Paiement à une personne : ENVOYER A ALAN DELIZEE +41 (0)79 457 23 57</p>
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Place, date ..... signature .....