

AXAMER LIZUM SKI TRIP PERMISSION FORM 2010

- Please complete the attached permission slip and Medical Form.
- The forms below must be electronically filled out and emailed to Mr. Herbert in order for your child to participate. Please check all that apply and email to ishskitrip2010@googlemail.com

Student Name: _____ Year: _____

SKI LEVEL

Advanced (*Very skilled-has skied more than 15 times. Has used ski lift/ tow, can do both parallel and snowplough turns very well*)

Intermediate (*Semi-skilled- has used ski tow and is competent with snowplough/ wedge turns and stops*)

Beginner (*Never had instruction, skied less than 3 times*)

SKI EQUIPMENT

Skis + Poles

Snowboard

Boots

Student has own skis/snowboard/boots

TOTAL COSTS

OPTION A

BASIC TRIP COST (€600) + SKIS/POLES/BOOTS (€56) = **€ 656**

OPTION B

BASIC TRIP COST (€600) + SNOWBOARD/BOOTS (€63) = **€ 663**

OPTION C

BASIC TRIP COST (€600) + SKIS/POLES/BOOTS (€56) + YEAR OF BIRTH 1982-1993 (€29) = **€685**

OPTION D

BASIC TRIP COST (€600) + SNOWBOARD/BOOTS (€63) + YEAR OF BIRTH 1982-1993 (€29) = **€692**

PLEASE RETURN THE PERMISSION SLIP AS SOON AS POSSIBLE IN ORDER TO SECURE YOUR PLACE DO NOT SEND ANY MONIES AT THIS TIME. YOU WILL BE BILLED AT A LATER DATE. FULL PAYMENT MUST BE RECEIVED BY MONDAY 11TH JANUARY 2010.

MEDICAL INFORMATION

Name: _____

Class: _____

Address: _____

Emergency Contact Numbers:
(Please give 2) _____

Does your child suffer from any allergies/asthma/diabetes or any other medical condition?

_____ YES / NO*

If yes, please give details:

In the event of an accident/injury every attempt will be made to contact you. If the school or responsible adult is unable to contact you are you happy for the coach/responsible adult to authorise treatment?

YES / NO*

Please list here any other comments or information which is relevant or effects normal participation in Physical Education:

Medical Insurance Company and Policy Number:

Signed:

Dated:

*please delete as appropriate