



APPLICATION FOR WINTER CAMP 2018 - 2019

Family Name of Child: _____

First Names: _____

Name Used: _____

Please Check: Boy Girl

Nationality: _____

Date of Birth: *(Day/Month/Year)* _____

Please Check: Boarder Day Camper

First Language: _____

Second Languages: _____

Name of Parent or
Guardian: _____

Mailing Address: _____

Postal Code: _____

Country: _____

Telephone Number(s): _____

Mobile Number(s): _____

Email Address: _____

This is to certify that I agree to the terms and conditions for winter camp, and that if this application is accepted by Lovell Camps, I will pay the camp fees in accordance with the terms. I understand that no portion of the registration deposit will be refunded unless written notice indicating that the above-mentioned camper will be unable to attend, is received by the camp 30 days before the session commences. I understand and agree that no reduction in fees or allowance will be made for my children's temporary absence, withdrawal or dismissal from camp.

Date: _____

Signature: _____



Please check the Session(s) Date(s) Required:

	Session:	Dates:
<input type="checkbox"/>	1	23.12.18 - 29.12.18
<input type="checkbox"/>	2	30.12.18 - 05.01.19
<input type="checkbox"/>	3	30.12.18 - 05.01.19
	4 - 6	Sessions 4, 5 & 6 are Fully Booked
<input type="checkbox"/>	7	03.02.19 - 09.02.19
<input type="checkbox"/>	8	09.02.19 - 15.02.19
	9	Fully Booked
<input type="checkbox"/>	10	24.02.19 - 02.03.19
<input type="checkbox"/>	11	03.03.19 - 09.03.19
<input type="checkbox"/>	12 - 14	Availability upon Request

Please note that the above dates are for boarders; day students should arrive on the Monday morning ready to ski and depart on the Friday evening after special events.