



## APPLICATION FOR WINTER CAMP 2019 - 2020

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	22.12.2019 - 28.12.2019
<input type="checkbox"/>	2	29.12.2019 - 04.01.2020
<input type="checkbox"/>	3	05.01.2020 - 11.01.2020
	4 - 6	Sessions 4, 5 & 6 are Fully Booked
<input type="checkbox"/>	7	02.02.2020 - 08.02.2020
<input type="checkbox"/>	8	09.02.2020 - 15.02.2020
	9	Limited Day Programs Only
<input type="checkbox"/>	10	23.02.2020 - 29.02.2020
<input type="checkbox"/>	11	01.03.2020 - 07.03.2020
<input type="checkbox"/>	12	08.03.2020 - 14.03.2020
<input type="checkbox"/>	13	15.03.2020 - 21.03.2020

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.