

Camper Name: _	
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REGISTRATION FOR WINTER CAMP 2023/2024 SESSION APPLICATION AND INSTRUCTIONS

ADMISSION

Boys and girls of all nationalities, ages of 5 to 16, who are in good health and able to participate fully in all winter camp activities. Lovell Camps offer camp sessions for a period of one or more weeks. We warmly welcome children to have an experience of a lifetime, in the world famous Gstaad Ski Region.

REGISTRATION PROCEDURE

- 1. Complete the following registration form and questionnaire or fill in our **online application** form at www.lovellcamps.ch
- 2. Upon receiving notification from the camp that place(s) are available, payment of a deposit of **half the fees per session**, must be made immediately. This deposit will be deducted from the fees, but will not be refunded unless written notice of cancellation is received by the camp **30 days before the session commences**.
- 3. A certificate of good health, to be provided by the camp, must be signed by a medical doctor. This certificate must be forwarded to the camp **30 days before the session commences**.
- 4. The balance of fees and extra charges must be paid **30 days before the session commences**.
- 5. Read and sign our 'Terms and Conditions'. Non-Refundable registration fees apply.

PRICE (Please put a check mark beside your choice and indicate number of sessions)

Boarder	CHF 2,200.00	per weekly session	# of Sessions:	
Day Camper	CHF 1,500.00	per weekly session	# of Sessions:	

SESSIONS (Please put a check mark beside your session or sessions of choice)

Session #	Dates	Session #	Dates	Session #	Dates
1	17.12.23 - 23.12.23	6 *	21.01.24 - 27.01.24	11 *	25.02.24 - 02.03.24
2	24.12.23 - 30.12.23	7*	28.01.24 - 03.02.24	1 2	03.03.24 - 09.03.24
□ 3*	31.12.23 - 06.01.24	□ 8*	04.02.24 - 10.02.24	1 3	10.03.24 - 16.03.24
4	07.01.24 - 13.01.24	9*	11.02.24 - 17.02.24	1 4	17.03.24 - 23.03.24
5 *	14.01.24 - 20.01.24	1 0*	18.02.24 - 24.02.24	1 5	24.03.24 - 30.03.24

^{*} Limited spaces available

Please confirm exact dates:	Start Date:	End Date:	

SESSION INFORMATION

Boarders arrive on Sunday's and depart on Saturday's throughout the season. Multiple sessions can be selected as long as there is availability.

Day campers attend Monday to Friday from 09.00 to 17.30.

* day camper parents may pick up their children at the ski hill after skiing ends at 16.00

Saturday and **Sunday** ski or excursion programs are offered to **boarders** who are staying for two or more sessions.

Day campers can join our weekend programs for an additional daily charge. (Please see our 'Optional Extra Charges')

INCLUDED

Fees include all ski and snow sport lessons and programs, ski pass, language lessons in either French or English. afternoon program (swimming, climbing, sports & activities), full room and board (boarders), lunches (day campers), snacks, school supplies and equipment, excursions and transportation to and from the ski hill and for excursion programs.

Not included are ski and snowboard rentals and equipment, camp shirts, baseball hats, German language lessons, medical insurance, airport transfers, door-to-door bus service, *pocket money and *personal expenses.

Additional fees may apply for special programs.

*Pocket money and *personal expenses will be taken out of the non-refundable weekly deposit charge of CHF 100.00 for boarders and CHF 50.00 for day campers.

WITHDRAWAL

There will be no reduction in fees in the event of a child's withdrawal, dismissal or temporary absence.

Please read and sign our 'Terms and Conditions' which is part of this registration.

PAYMENTS

Payments should be made in **Swiss Francs** by bank transfer to

Lovell International Camps AG

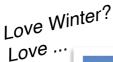
at the following bank:

Credit Suisse, Promenade, CH-3780 Gstaad, Switzerland

Acct. No. 1422166-31 Swift No. CRESCHZZ80A

IBAN: CH45 0483 5142 2166 3100 1

When making a bank transfer, please indicate the <u>name of the child(ren)</u> for whom you are making the payment.







WINTER INFORMATION QUESTIONNAIRE

GENERAL

	Name of Child:			Birthdate:		
	Height in CM:	Weight in KG:		Shoe Size:		
	Name of Parent or Legal Guardian:	_				
	Camp Session(s) and Dates:					
	Permanent Mailing Address:		_	Winter Address (if local):		
			-			
	Telephone (Main):		Telephone (Main):			
	Mobile:		2nd Mobile:			
	Email:		2nd Email:			
В.	TELL US ABOUT YOUR CHILD	4.41		Otherstonesses		
	Nationality:	1st Language:		Other Languages:		
	Briefly outline the subjects, hobbies, s	sports, etc. in whic	ch your child is intere	ested:		
	Does your child have any social, acad	lemic or disciplina	ry problems?			
	Has your child ever been to a camp?	Han your shild ay	ar baan ta an awarni	cht comp?		
	nas your child ever been to a camp?	nas your crilid ev	er been to an overni	gii camp:		
	Are there any special measures to be	taken concerning	your child's health?	(e.g. allergies, infection problems, medicines, injuries)		
	List any violent food dislikes and food allergies:					
	Special Remarks:					
	Please indicate whether your child will be participating in the Ski or Snowboard program.					
	Ski Program		Snowboard Progra	am		
C.	OKUNO ABILITY					
.	SKIING ABILITY: Non-Skier Weak	Intermediate		scribes your child's skiing Very Good		
			Good	very Good		
	List any levels achieved and any help	iui imormation:				
D.	SNOWBOARD ABILITY:	Please check the	e box which best de	scribes your child's snowboarding		
	Non-Snow. Weak	Intermediate	Good	Very Good		
	List any levels achieved and any helps	ful information:				

	SWIM ABILITY: Please check the box which best describes your child's swimming			ld's swimming		
	Beginner	Weak	Intermediate	Good	Very Goo	od
	Please CHECK the box to choose your child's 'OPTIONAL EXTRAS':					
	. Equipment Renta	al (CHF 130/week)	. Helmet Rental (CHF 20/wee		. Medical	Insurance (CHF 150/week)
	. T-Shirt (CHF 40)		. Baseball Ha	t (CHF 35)	Day Cam	nper Shuttle Service (CHF 150/week)
	. Geneva Airport (0	CHF 150 per child p	per way)	. Zürich Airport	t (CHF 300 per chile	d per way)
	. Arriving as Unac	companied M ino	r (UM)	. Departing as	UM	
E	LANGUAGE CLASSES OR AFTERNOON PROGRAM: Children can choose to take part in language lessons or afternoon program. Language lessons occur 3 x 1 hour per week. Please check:					
	☐ A	fternoon Prograr	n	Language Lesson	s	
	Language to be stud	lied at camp:	ENGLISH	<u>OR</u>	FRENCH	GERMAN (CHF 90/lesson)
	Has your child studied	the language cho	sen above?	Yes	□ No	_
	If the answer is "yes" to	o the above quest	ion, give details as	to how long, by what	t method.	
	Please rate your child's	knowledge and un	derstanding of the	language to be studio	ed by checking the	box next to the appropriate word:
	a) Conversational Ab	_	_	_	_	
	Beginner	Weak	Intermediate	Good	☐ Very God	od
	a) Writing Ability and	Grammatical Kno	<u>owledge</u>			
	Beginner	■ Weak	Intermediate	Good	Very Goo	od
	Comments:					
G.	TRAVEL ARRANGEN	MENTS (BOARDE	RS ONLY)			
	Please read the "Inst being met in Geneva		•	dicate the exact tim	ne and method of	f your child's arrival and departure. If
	being met in Geneva	or Zurich, give in	ignis and times			
	Arrival Infor	mation:	Arriving Airport	in Switzerland:		
			Airline:		Flight Number	:
			Arriving From:		Arrival Time:	
			Connecting Flig	ht Information:		
	Departure Inf	ormation:	ation: Departing Airport in Switzerland			
			Airline:		Flight Number	 :
			Departing To:		Arriving At:	
			Connecting Flig	ht Information:	_	
				ny child to Camp	I will pick	my child up from camp
	Date:		Signature of Par	rent or Guardian:		

E. OPTIONAL ACTIVITIES: