

Nursery Les Loupiots INSCRIPTION

Requested dates: _____

Gardiski (Nursery + ski) Garderie (Nursery)

CHILD Last and First name: _____

DoB: _____ Age at the moment of stay: _____ Weight: _____

Comforter, blankie, pacifier: _____

Allergies, health issues, special diet, or any other pertinent information we should be aware of:

PARENTS Last and First name: _____

Home Address: _____

Vacation Address: _____

Mobile phone (if foreign make sure it works in France! We will call you in case of emergency. Please indicate country code): _____

e-mail: _____

I do not accept commercial emails.

Person with authority to pick up your child from the nursery (Last, first name and phone number):

I, (your name) _____ hereby confirm the following:

* That my child is up to date with all by law obligated vaccinations. Copy of vaccination certificate to be presented first day of attendance.

* I authorize, in case of emergency, transfer to hospital and/or medical center and surgical intervention if medical personal so decide.

* I have read, understood, and accepted the terms and regulations regarding the « Les Loupiots ».

* **I will be present every day to make the transfer from nursery to ski school; to put on the bib before the start of each ski lesson.**

* I authorize photos of my child can be taken and utilized in promotional and decorative purposes (photos will not be sold to a third party nor will they be used for commercial purposes) yes no

Date and Signature:

SIGNATURE of parent or legal guardian preceded by following phrase: «*Read and understood*»