

## Welcome PIOU PIOU



For children from 3 years old, the PIOU PIOU club is open from Sunday to Friday at Montana Mini club or Roc de Peclet Mini club.



From 8.30am to 5pm for the whole day
From 8.30am to 12.00am for the morning
From 2pm to 5pm for the afternoon
From 8.30am to 1.45pm for the morning + meal
From 12.00am to 5pm for the afternoon + meal

Thank you for respecting this timetable.

In case od disrespecting the hours, there will be a charge of 16 €.

High season only: You can visit the Miniclub between 5pm - 6pm, on the Saturday. At your arrival, undress your child from ski clothes and when you leave dress your child.

For your child's comfort, please bring:

- A change of clothes
- Warm clothes, sunglasses, hat, buff, boots, waterproof gloves (no wool).
- The favorite thing of your child (bear, blanket, dummy ...) labelled with his name.
- Health record (Vaccination required).
- Ski equipment required (skis + shoes + helmet required) from Monday.
- Please do not forget to apply sun cream before arrival.

For your security and hygiene, we can not accept ill children.

We reserve the right to control their temperature, and in case of doubt, refuse admittance.

We will examine a possible return upon presentation of a medical certificate issued by a doctor stating that

the child is no longer contagious.

In the event of a possible refund, this will be made on a prorata basis.

Each day started will be charged for.

WE WISH YOU A GOOD STAY IN VAL THORENS

miniclub@esf.me

Tel Montana: +33(0) 479 010 238



## **PIOU PIOU**

## **Information Form**<sup>1</sup>

CHILD.								
NAME : SURN.	AME:			•••••	Date	of	birth :	
DATE OF STAY: from	to			•••••				
In order to adapt to your child's lifestyle, w	ve require fur	ther info	ormation:					
Does your child have a nap, if so at what time?								
• Does he/she have a dummy ?			•••••					
• Does he/she have a favorite toy, if so p	lease describ	e:		••••••	••••••	•••••		
Medical information								
•		•••••			•••••	•••••		
If Yes, please join a medical prescription pl	lus the medic	ine (in t	he original box with	the instru	ctions)			
No medicine may be taken without a prescr	ription.							
Health problems, allergies, physical or s								
• DTP vaccination up to date : ☐ Yes								
please join a medical certificate.								
Phone number of doctor in home country	ry:	••••••		••••••	••••••	•••••		
Person responsible for the child:								
Name, Surname:			•••••		•••••			
Address in Val Thorens :			•••••		•••••			
Permanent		addre					:	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	••••••	•••••••••••••••••••••••••••••••••••••••		•••••	•••••	•••••	
Mobile phone number during the stay 1: (R	lequired):	•••••	•••••		•••••	•••••		
Mobile phone number during the stay 2: (R	Required):	•••••	•••••		•••••	•••••		
Other people authorized to pick up the chil	d:		•••••			•••••		
Do you have other children in our ski school	ol ?		No					
Mail							:	
		•••••			•••••		•••••	
•••••								

<sup>&</sup>lt;sup>1</sup> Confidential information, only for our staff at the Mini Clubs.

In case of any problems concerning the health of	f my child (fever, vomiting, diarrhea) I will pick him
up as soon as possible.	
<ul> <li>✓ Authorize the director to take the necessal hospitalisation, medical surgery) according to the</li> </ul>	ry measures required (such as medical treatment, e child's state of health.
DATE:	SIGNATURE:

I, the undersigned, ....., legally responsible for the child, declare that,