

The King's Hospital

Ski Trip 2016

Dear Parent

We are planning the school **Ski Trip 2016** and have made a provisional booking for Pila, Italy; this will be open to all students.

The dates of the trip will be: **16th – 23rd March 2016**

The total cost of **The King's Hospital Ski Trip** will be **€1100**.

The 2016 Ski trip will be going to Pila, Italy.

The trip is open to all students of all abilities, from first time skiers to experienced black run skiers. Students will be placed in groups according to previous experience and ability.

The price of the trip is based on 4 hours qualified ski tuition per day for 6 days, return flights and transfers. The hotel includes full board accommodation and evening activities. Skis, ski boots, lift passes and insurance are included, but students will need to provide their own clothing.

There are 40 places available and places will be assigned on a first come basis.

Should you wish your child to participate in The King's Hospital Ski Trip 2016, please complete the Essential Information Form (on the reverse) and send it along with a €300 deposit in an envelope marked Ski Trip 2016 – Ms Bill before September 7th 2016.

Payment Plan

7 th September 2015	€300*
15 th October 2015	€300
30 th November 2015	€300
1 st February 2016	€200

* Non-refundable deposit on place being secured

Further information regarding the Ski trip will be issued once final numbers for the visit are known. If you have any queries regarding the visit, please do not hesitate to contact me.

Many thanks

S Bill & D Maguire
Ski Trip Coordinators
s.bill@thekingshospital.ie

P.T.O



Name of Child			
House		Date of Birth	/ / (DD/MM/YYYY)
Parent Name			
Contact Number			
Email Address			
Passport Number		Country of issue	
Nationality		Date of Expiry	
Weeks Skied		Shoe size	
Weight (Kgs)		Height (cms)	
Dietary Requirements			
Allergies/ special needs			

DECLARATION:

- i. I consent to my child taking part in the The King's Hospital Ski Trip on 16th to 23rd March 2016
- ii. I agree that my child is fit to participate in this visit
- iii. I have been informed that insurance is included in the cost and have been given information about where to find details
- iv. I understand that the School reserves the right to refuse applications, or withdraw students at a later date, for behavioural reasons
- v. I enclose cash/cheque for €300 which I understand is non-refundable, should the visit take place.
- vi. Cheques should be made payable to The King's Hospital
- vii. Where a student's behaviour on a visit constitutes a serious disciplinary matter, the School reserves the right to send the student home with any resultant expenses being the responsibility of the parent.
- viii. Whilst away the pupils are ambassadors for the school and will be expected to adhere to the school rules as laid out in the policy and Procedures document.

Parents agree to the above statements and by signing this form I confirm the essential information given is complete and correct.

Signed.....

Date