

Northampton School for Boys	Ski Trip	Pupil Information Sheet
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Please complete the following details accurately.

Personal Details - name must be exactly as passport

Forename Middle Name(s) Surname

Date of Birth Age at Date of Travel Yr Group at Travel

Height (cm's) Weight (kg) Shoe Size (UK)

Head Circumference (cm) Nickname on Hoodie Hoodie Size

Full Postal Address

Please advise of any medical/behavioural considerations: *(use reverse as necessary)*

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Please advise of any special dietary requirements: *(use reverse as necessary)*

Ski Experience.	None skier, no experience of any kind previously	<input type="checkbox"/>
<i>tick as appropriate</i>	A = beginner, may have had an introduction at snowzone etc	<input type="checkbox"/>
	B = lower intermediate, skied for 1 or 2 weeks previously	<input type="checkbox"/>
	C = upper intermediate, can control speed + link turns on red runs	<input type="checkbox"/>
	D = advanced, confident getting down any marked piste in resort	<input type="checkbox"/>

Ski Equipment.	Will your son/daughter be bringing any of the following items of equipment?			
<i>tick as appropriate</i>	Ski Boots <input type="checkbox"/>	Helmet <input type="checkbox"/>	Skis <input type="checkbox"/>	Poles <input type="checkbox"/>

Details of Parent/Guardian

Surname Forename

Email address (important information will be sent via email)

Emergency Contact Details for duration of trip:

Name	Home number
Relationship	Work number
	Mobile number

Alternate Contact as appropriate	Name
	Number

I believe the above details to be correct.

I agree that if my child requires urgent medical treatment during the trip and it is not possible to contact either parent/guardian, then the teacher in charge of the party is authorised to give consent on my/our* behalf for treatment as necessary.*

I also give my permission for teachers to administer Ibuprofen / Paracetamol as appropriate.

*(*Delete as necessary)*

Signature of Parent/Guardian Date: