



**Information Request for Ski Trip**  
**(to be returned to Ski Trip Organiser by.....)**  
**IMPORTANT INFORMATION**

CHILD'S NAME:

MALE / FEMALE:

DATE OF BIRTH:

CHILD'S SKI ABILITY (PLEASE CIRCLE): 

NS	BEG	INT	ADV
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NS = Never skied

BEG = up to snow plough turns

INT = snow plough to basic swing turns

ADV = parallel turns

UK SHOE SIZE:

HEIGHT (CMS):

WEIGHT (KG):

HELMET SIZE (CIRCUMFERENCE OF HEAD IN CMS):

PLEASE GIVE DETAILS OF ANY SPECIFIC DIETARY REQUIREMENTS:  
Please include full details if your child has any special dietary requirements.

GIVE DETAILS OF ANY MEDICAL CONDITIONS, ALLERGIES AND CURRENT MEDICATION:  
If your child has any allergies (e.g. nuts) please state: what the reaction is, how it occurs (is the reaction from digesting or an airbourne allergy) and if they have an EpiPen or medication ?

