## COSLEY & HOUSTON ALPINE GUIDES



Signature of Participant:

151 Route de Lausenaz • 74310 Les Houches, France • phone +33 450 21 24 47 www.cosleyhouston.com • kathyandmark@cosleyhouston.com

## 2021 Program Application & Registration Private Ski Programs

Use this form for booking a private ski trip with us. To reserve your space complete both sides of this form and a release of liability form, and return them to us with your deposit.

name:	address:	
city:state/prov:		
contact phone: email:		
program name:	program dates:	
total trip fees:	deposit amount (normally € 500):	
emergency contact:	contact phone:	relation:
In order to secure your place in a program a deposit of 500 Euros is due at the time of registration. We cannot hold your place without this deposit. The balance of the trip fees is due 90 days prior to the starting day of the trip. This is the balance due date. For registration after the balance due date, full payment is due at the time of registration. If full payment is not received by the balance due date and other arrangements are not made with us, we reserve the right to consider your registration canceled.  Cancellation & Refund Policy  If you cancel your enrollment for any reason the following policy applies:  If you cancel 90 days or more before the balance due date, you will receive a refund of all payments and deposit.  Cancellation occurring after the 90 day balance due date will result in a complete forfeiture of all fees.		
Trip cancellation, Interruption & Emergency Evacuation Insurance In order to protect yourself from the loss of nonrefundable fees we strongly recommend you purchase trip cancellation insurance. This type of insurance will allow you to recover fees resulting from cancellation due to personal or family illness occurring before or during your program.		
Conditions of Participation  There are a number of conditions required for participation in our programs. These include, but are not limited to agreement with, and understanding of the cancellation and refund policy outlined above.		
I have read and agree to the conditions of the Cancellation and Refund Policy set forth in this registration form.		

## Previous Experience & Medical Information

The completion of this portion of your application form helps us in helping you to maintain good health during your trip by alerting us to special medical requirements and concerns you may have, and it helps us in our general goal of reducing risk while maximizing and realizing your personal potential.

Please answer all questions. Attach a separate sheet if you need more room.

1. Do you have any allergies? Describe. If you have a known allergic reaction, such as to insect bites or specific foods, we strongly recommend you carry an anaphylaxis kit.

2. Are you allergic to any medications? Describe. If yes, please describe the nature and severity of your allergic reaction.

3. Do you have a history of asthma?

4. Have you ever had any joint injuries? Describe. Specifically, have you had injuries to knees, ankles or shoulders?

5. Will you be taking any medication during this program that we should know about? If so, please describe.

6. Has altitude illness ever caused you significant discomfort, or prevented you from achieving climbing or skiing goals? Describe the circumstances.

Outdoor Activity - Skiing and Climbing Experience

year month

8. Do you have any special dietary requirements?

Date of Birth:

Please use a separate sheet of paper to answer the following questions.

- 1. Please give us a brief description of your current physical condition.
- 2. Describe your current level of regular exercise. We would like to know what activities you engage in, your history of involvement in those activities, how frequently you practice them, and for how long.
- 3. Skiing or climbing history. If it is extensive, highlights showing length of involvement and diversity will do.

7. Are there any medical or physical conditions which might limit or affect your participation in this program? Describe.

4. If you have been skiing or climbing with us before, please remind us of how the trip went for you, and the degree of success in achieving your objectives.

Please send your completed registration and deposit to:

Kathy Cosley & Mark Houston 151 Route de Lausenaz 74310 Les Houches, France



IFMGA Mountain Guides
AMGA Certified Guides

Height:

Weight:

