

Individual registration form Lessons sit ski and standind - 2024/25

Please fill out this form as best as possible for our secretariat and our instructors.

		Ski session (with framing)			Equipment loan							
	•	Tandemski / Tandem'flex		₽	Tandemski / Tandem'flex							
	j	Uniski / Dualski		 	Uniski							
	j	Snow'kart Tétraski		卍	Dualski Scarver							
	į	Standing Ski		亡	Snow'kart							
	Trainee :											
Nam	ıe:	* First	st name :	•••••	*							
	Address:*											
Phone or	n site :	Mol	bile mobile:	•••								
E-mail:		* Ca										
our disal	ability:	r size : You										
□ Pa	araplegic : lesio	ion height:										
□ Qı	uadriplegic : اد	esion height:		,								
		standing / manuel chair / electric ch										
□ He	Hemiplégia :	right / left										
		• Prescriber, if different from th	ne trai <u>nee</u> :									
Nam	na •											
					other, sister, friends):							
E-mail:			V	Will	you be present during the stay? YES - NO							
Your	ır stay :											
Planned	place of reside	ence:	. Arrival/depa	artu	ure dates:							
Dlanned	' and num'	ber of hours of skiing:										
	Exemple : Monday	Der of hours of skiing:		—								
Day	Exemple : Monday 17/01/25											
NB desired hours	Exemple : 2H If possible morning			_								
The check o	or deposit transfer t	to be returned to us must correspond to 50% of the total ar	mount of the sche	edule	ed course hours (for the calculation see the attached sheet)							
<u>Equi</u>	ipement:											
		po, Scarver / Taille de coque):										
•		with Loisirs Assis Evasion? YES - NO If yes, contact			·							
•												
		we are required to take photos which can be distributed as please check the box below:		nicat	ation media. (flyers, Facebook, Website, press,). If you do no							
communica	cations, please chec	ise the email address you provided to inform you about ck the box below: The			e association's activities. If you do not wish to receive these							
111		THE	01511411	arc	•							
signing I	acknowledge h	naving read and accept our general conditions	s of sale.									
otal amoun ppendix), p	nt of your course payable to Loisirs		check correspon		Passy, with the check or deposit transfer of 50% of the desired equipment (see notice							
		-										
'HO no		The :	• • • • • • • • • • • • • • • • • • • •		Amount :							



--- WINTER ACTIVITY PRICES --- 2024/2025

Sit ski session at Combloux:

€50 per hour for an hour and a half or two hours

For other half-day or full-day rates, Individual or group, Please contact us by email at:

contact@loisirs-assis-evasion.com

Prices may vary depending on the stations, duration and type of service.

For the payment of your reservation requests, 50% of the total amount must be paid upon reservation, and payment of the balance at your first lesson, ski lifts are extra.

TERMS OF EQUIPMENT LOAN

The loan of adapted equipment from the association is free for individuals at the Combloux resort. Requests outside Combloux and all requests made by a professional or an association will be subject to rental. Please contact us by email to find out the amount and terms of the loan. Once your loan request has been made and validated, please contact us three days before in winter and one week before in summer to organize the loan of the equipment.

Material	Deposit check requested			
TANDEM SKI / TANDEM'FLEX	5 000 €			
UNISKI	3 000 € 4 000 €			
SCARVER				
DUALSKI	3 000 €			
DUALSKI PILOTE	3 000 €			
SNOW'KART				



Relevé d'Identité Caisse d'Epargne

Ce relevé est destiné à être remis, sur leur demande, à vos créanciers ou débiteurs appelés à faire inscrire des opérations à votre compte (virement, paiement de quittance, etc.).

Son utilisation vous garantit le bon enregistrement des opérations en cause et vous évite ainsi des réclamations pour erreurs ou retards d'imputation

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IBAN												
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BIC

C E P A F R P P 3 8 2

SALLANCHES
20 PLACE CHARLES ALBERT
74700 SALLANCHES
TEL: 08.20.07.58.13

Intitulé du compte ASS LOISIRS ASSIS EVASION
ASS LOISIRS ASSIS EVASION FORM
266 IMPASSE DE LA BOESNA
74190 PASSY