

Skiing4all Booking Form 2019/20

PART 1: Booking Preferences page 2

 \rightarrow Please fill in and return now

PART 2: Participant's Details pages 3 - 6

 \rightarrow Please fill in and return now

PART 3: Pre-departure Form pages 7 - 9

 \rightarrow Due 4 weeks before arrival

Please email the completed form to info@skiing4all.com and copy to skiing4all.austria@gmail.com

Thank you!

PART 1: Booking Preferences

CONTACT DETAILS					
Your name:					
Home address:					
Email address:	Email address: Tel. number (incl. country code):				
PROGRAM DATES					
Preferred start date:	Preferred start date: Alternative start date: Second alternative start				
If you have listed school holiday of have no spaces available, would considered for the school term tin	d you like to be		ime date(s), if applicable:		
PROGRAM 1 FOR THE MAIN PART	ICIPANT WITH SPE	CIAL NEEDS			
Participant's name:					
Preferred program duration (3, 5 or 6 days):	Alternative	Alternative program duration: Second alternative program duration:			
Preferred program type (S, M, L, XL or XXL):	Alternative	Alternative program type: Second alternative program type:			
ONE-TO-ONE CARE UPGRADE REQUIRED? (See p.26 of our brochure for details) YES / NO					
PROGRAM 2 FOR A SIBLING / FRIEND					
Participant's name:					
Preferred program duration (3, 5 or 6 days):	Alternative	Alternative program duration: Second alternative program duration:			
Preferred program type (S, M, L, XL or XXL):	Alternative	Alternative program type: Second alternative program type:			
PROGRAM 3 FOR A SIBLING / FRIE	ND				
Participant's name:					
Preferred program duration (3, 5 or 6 days):	Alternative	program duration:	Second alternative program duration:		
Preferred program type (S, M, L, XL or XXL):	Alternative	Alternative program type: Second alternative program type:			
ACCOMMODATION					
Will you be staying at one of our partner hotels? We need to know this for the discount purposes. YES / NO / MAYBE					
ADDITIONAL INFORMATION:					

PART 2: Participant's Details

RETURNING GUESTS: Please complete only those fields where there are significant changes from the last time you supplied us with the information. You can do this until four weeks before arrival.

NEW GUESTS: Please kindly take the opportunity to let us know more about our prospective program participant so that we can advise you on the type of program we recommend. The information you give here will also help us identify the most suitable members of staff and let us confirm their availability for your chosen dates. All the information will be treated as confidential and used only for the purposes of providing the best possible service and care for your family.

MAIN PROGRAM PARTICIPANT WITH SPECIAL EDUCATIONAL NEEDS						
Full name:		Date of birth (dd/mm/yyyy): Gender: M / F				
Height in cms:	Weight in kgs:	UK shoe size: Physical fitness level:				
Diagnosis / special	needs:					
Communication an	d social skills:					
Everyday skills (ind	Everyday skills (independent dressing, shoe-lacing, eating, etc):					
Any physical disability? YES / NO If yes, please provide details:						
Any other medical conditions or medications we should know about? YES / NO						
Eating habits (special diets, likes/dislikes, meal times, any allergies, etc.)						
Bathroom habits (reminders needed, help, etc.)						
Favourite rewards / reinforcements (activities, stickers, etc.)						

Any unusual fears / phobias?	
Any running away / hiding behaviours? How do you deal with them?	
Any particularly challenging or violent behaviours? How do you deal with them?	
Level of danger awareness:	
Skiing experience, if any:	
Skillig experience, il ally.	
Swimming skills:	
Horse-riding skills:	
Favourite outdoor and indoor activities / sports, if any:	
ADDITIONAL INFORMATION:	

SECOND PROGRAM PARTICIPANT WITHOUT SPECIAL EDUCATIONAL NEEDS (sibling or friend)					
Full name:		Date of birth (dd/mm/yyyy): Gender: M / F			
Height in cms:	Weight in kgs:	UK shoe size:	Physical fitness level:		
Any medical conditions or medications we should know about? YES / NO					
Eating habits (spec	cial diets, likes/disli	kes, meal times, an	y allergies, etc.)		
Favourite rewards	; / reinforcements (a	activities, stickers, e	tc.)		
Any unusual fears	/ phobias?				
Skiing experience,	if any:				
Swimming skills:					
Horse-riding skills	:				
Physical fitness lev	vel:				
Favourite outdoor	activities and sport	ts, if any:			
Favourite indoor activities and hobbies, if any:					
Additional informa	ation:				

THIRD PROGRAM PARTICIPANT WITHOUT SPECIAL EDUCATIONAL NEEDS (sibling or friend)					
Full name:		Date of birth (dd/mm/yyyy): Gender: M / F			
Height in cms:	Weight in kgs:	UK shoe size:	Physical fitness level:		
Any medical conditions or medications we should know about? YES / NO					
Eating habits (spec	cial diets, likes/disli	kes, meal times, an	y allergies, etc.)		
Favourite rewards	; / reinforcements (a	activities, stickers, e	etc.)		
Any unusual fears	/ phobias?				
Skiing experience,	if any:				
Swimming skills:					
Horse-riding skills	:				
Physical fitness lev	vel:				
Favourite outdoor	activities and sport	ts, if any:			
Favourite indoor activities and hobbies, if any:					
Additional informa	ation:				

PART 3: Pre-departure Form

Please return this part of the form no later than four weeks before arrival.

ANY SIGNIFICANT CHANGES REGARDING PARTICIPANT(S) FROM THE LAST TIME YOU SUPPLIED US WITH INFORMATION OR FROM YOUR LAST VISIT?					
CURRENT SIZES: MAIN P	ROGRAM	PARTICIPANT			
Name:	Height i	n cms:	Weight in kgs:		UK shoe size:
CURRENT SIZES: SECOND	PROGRA	M PARTICIPAN	Т		
Name:	Height i	n cms:	Weight in kgs:		UK shoe size:
CURRENT SIZES: THIRD P	ROGRAM	PARTICIPANT			
Name:	Name: Height in cms:		Weight in kgs:		UK shoe size:
YOUR CONTACT DETAILS	IN AUSTI	RIA			
Main mobile number, incl. country code: Alternative mobile number, incl. country code:					incl. country code:
Accommodation name (a	and addre	ss if not our par	rtner hotels Schütt	hof, Latini	or Freiberg):
Accommodation arrival date:			Estimated arrival time:		
PRIVATE AIRPORT TRANSFERS					
			-		ole driver will await you at
your airport arrivals hall with our Skiing4all sign and take you directly to your accommodation in Zell am See or Kaprun. Prices one way for up to 8 passengers with luggage: Salzburg: 165€, Munich: 315€,					
Innsbruck: 240€. Other airports on request.					
Airport transfer ON ARRIVAL required? YES / NO		IF YES: Arrival airport:			
Date of arrival: Time of arriva		1:	Arrival flight number:		
Number of adults: Number of children:					
Airport transfer FOR DEPARTURE required? IF YES: Departure airport: YES / NO					
Date of departure:		Time of depart	rture: Departure flight number:		re flight number:
Number of adults:	er of adults: Number of children:				

PREFFERED PROGRAM HOURS

Our standard Skiing4all programs run for five and a half hours per day between the hours of 08.15 and 16.30 (typically from 09.45 to 15.15, subject to the seasonal availability, weather conditions, etc.). Subject to availability, which program hours would the participant(s) prefer?

Early bird (start 08.15 - 09.00) - particularly recommended during school holidays (least busy) and later in the season (best snow)

Early (start between 09.00 - 09.45) | Standard (start at 09.45) | Late (start between 09.45 - 11.00)

ADDITIONAL PROGRAM HOURS

Our Skiing4all programs run for five and a half hours per day but you can add extra time if required. Fee: 15€ per half an hour.

Extension hours required?

Details:

YES / NO

FRIDAY PROGRAM EXTENSION

Our standard 5-day Skiing4all programs, just like at regular ski schools, run from Sunday to Thursday inclusive. Subject to availability, we can run any type of program till Friday. Fee: pro-rata payment.

Program extension required? YES / NO

Names of all, for whom you would like the extension:

Special requests / additional information:

FRIDAY FUN CLUB

Skiing4all Fun Club is open on Fridays for five and a half hours and we welcome all our program participants, their siblings and friends. Options included in the price: sledging; snow-shoeing; igloo project; town trip with life skills; play & activity park or Nordic walk; music, movement & dance sessions; baking class; and various other indoor workshops, sports and games. Max. two participants with special needs to one staff member at all times. Fee: 170€ per day. Siblings and friends 50% discount.

Fun Club required?
YES / NO

Names of all, for whom you would like the Friday Fun Club (with ages

if new to us):

Special requests / additional information:

AFTERNOON SWIMMING CLUB

We run fun pool activities (typically from 17.00 to 20.00) at the fabulous 25-metre pool in Zell am See with water slides, stream jets and a pirate ship for children. For all our program participants, their siblings and friends. Max. one participant with special needs to one staff member at all times. Fee: 75€ per afternoon (3 hours). Siblings and friends 50% discount, with free pick-up and drop-off at your accommodation. Optional dinner at the swimming pool restaurant: 15€ per person.

Swimming Club required?

Preferred day(s) of the week:

Dinner required?

YES / NO

Names of all, for whom you would like the Swimming Club (with ages if new to us):

Special requests / additional information:

BABY-SITTING

Baby-sitting service for all our program participants, their siblings and friends, is available on most evenings at your accommodation. Fee: 25€ per hour for the first 1-2 persons, 10€ for each additional person. Minimum booking 3 hours.

Baby-sitting required?
YES / NO
Dates / times required:

Whom would you like a baby-sitter for (with ages if new to us)?

Special requests / additional information:

SKI JACKET, SALOPPETES AND GOGGLES HIRE

There is no longer need to buy skiing salopettes or ski jackets, only to find out that the children grow out of them the following year! We are happy to rent these at 15€ per item per week. We also rent goggles at 5€ per week. Limited availability, please book in advance.

Name:	Height in cms:	Clothing size:	Items required:
Name:	Height in cms:	Clothing size:	Items required:
Name:	Height in cms:	Clothing size:	Items required:
Name:	Height in cms:	Clothing size:	Items required:

PHOTOS AND VIDEOS

We take photos to record the progress of our program participants. During the course of the week, we would like to post some of the best photos on our Facebook (facebook/skiing4all). This usually makes our participants very proud and motivated, and provides great inspiration for our prospective program participants. Please let us know if you have any objections to us doing that. Thank you!

I agree for such photos to be taken and published on Facebook. YES / NO

If yes, can we mention name? YES / NO

If yes, can we mention age? YES / NO

If yes, can we mention diagnosis? YES / NO

NOTES:

Would you like to pre-order photos and videos taken during the course of the program (approx. 50 files)? **Electronic download using a link to our cloud storage** (20€) YES / NO

ADDITIONAL REQUESTS / INFORMATION