

TRIP APPLICATION FORM

Name	_____	Ski Club	_____	(Membership #)
	(<i>exactly as it appears on your Passport</i>)	Telephone	_____	
Address L1	_____	Work/Cell	_____	
L2	_____	Email	_____	
City/Province	_____	Date of Birth	_____	(DD/MM/YY)
Postal Code	_____	Citizenship	_____	Passport # _____

PAYMENT OPTIONS – see instructions on Voyages Gendron portal

Credit Card Master Card Visa American Express (*no extra fee to use credit card*)

CALCULATIONS for your reference only – all payments made via Voyages Gendron portal

PACKAGE	ADDITIONS	DEDUCTIONS
DOUBLE occupancy		No lift pass <input type="checkbox"/> \$ 560.00
Double – 2 beds <input type="checkbox"/> \$4,109.00		Skiers 65+ <input type="checkbox"/> \$ 80.00
Double – 1 bed <input type="checkbox"/> \$4,109.00	Optional Insurance * <input type="checkbox"/> \$ _____	Skiers 80+ <input type="checkbox"/> \$ 265.00
SINGLE occupancy <input type="checkbox"/> \$5,209.00	* contact RASki for costs	Land Only <input type="checkbox"/> \$ 1,250.00
TRIPLE occupancy * <input type="checkbox"/> <i>inquire</i>		
Package Total (A) <input type="text"/>	Additions Total (B) <input type="text"/>	Deductions Total (C) <input type="text"/>
Total (A) + (B) - (C)		⇒ TOTAL package cost = <input type="text"/>

Deposit Due upon Registration 10% TOTAL + optional ins 10% (+ ins _____) \$ _____

Balance November 22, 2024 (70 days prior to departure) **Balance owing** \$ _____

ROOMMATE - Please indicate:

Sharing with: _____

Assign a roommate: *If we are unable to make a match, single occupancy cost will apply.*
If you are solo, wishing to share accommodation, the Club will attempt to match you with a suitable roommate.

TRAVEL INSURANCE

- I **accept** Voyages Gendron Travel insurance and include payment with Deposit (*see Information Package*).
- I **decline** Voyages Gendron Travel insurance. *You must sign the INSURANCE WAIVER (below).*

INSURANCE WAIVER – Complete this portion only if declining Voyages Gendron Travel insurance

I have declined to purchase the travel and/or cancellation insurance offered in this package and will not hold Voyages Gendron, the Trip Leader, nor the RA Ski & Outdoor Club responsible for any expenses incurred as a result of my refusal to purchase this travel insurance.

Signature: _____ Date: _____

My alternative Travel insurance is provided through:

Travel Insurance Company: _____

Certificate #: _____ 24 hr phone #: _____

MEDICAL INFORMATION and INSURANCE

Name: _____

Health Insurance # (OHIP/Quebec/other): _____

Medical Insurance Company: _____

Certificate #: _____ 24 hr phone #: _____

Person to be notified in case of an emergency _____ Relationship: _____

Telephone: _____ Cell: _____ Email: _____

Doctor's Name: _____

Address: _____ Telephone: _____

Do you suffer from any of the following:
Epilepsy No () Yes (), Asthma No () Yes (), Diabetes No () Yes (),

Other? _____

Are you under any treatment which should be continued on the tour? No () Yes ()
If Yes, please specify (including medications and where it will be kept during the trip i.e. pocket, toiletry kit, etc.):

Do you have allergies to any food or medications? Please specify:

Do you carry an epi-pen? No () Yes () Where? _____

Do you have any food restrictions (religious or other)? Please specify:

I am in good physical condition and able to participate in all regular activities. To the best of my knowledge, the above information is correct. However, should it become necessary, I hereby give permission to the physician approved by my insurance provider to hospitalize, or secure proper treatment for me in case of an emergency. I am aware that I am responsible for payment of all costs incurred in such emergency and assistance will not be provided by Voyages Gendron, the RA Centre, the RA Ski & Outdoor Club, or the Trip Leader.

Signature: _____ Date: _____

STATEMENT OF UNDERSTANDING of TERMS and CONDITIONS

The undersigned releases the RA Centre, the RA Ski & Outdoor Club and the Trip Leader for any damage or injury to person or property, however caused, arising out of or resulting from any services, sales or accommodation provided in connection with the ski trip for which this application is made.

I have read, understood, and agree to the Terms and Conditions of the Application form for the RA Ski & Outdoor Club Weeklong trip, as described in the Weeklong Trip Information Package. This Application form will serve as a binding agreement between this applicant and Voyages Gendron.

Signature: _____ Date: _____