LD Kite - Reservation Form

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Deposit:

Surname: _____ Name: _____

Tel #: _____ Email: _____

Age:_____ Weight_____ Height_____ Shoe Size_____

Address:_____

Address whilst on holiday_____

EMERGENCY CONTACT _____

Which package would you like?

- ☐ Course: 3 x Private Lessons - 570€
- ☐ Course: 3 x Lessons in a group of 2 - 450€
- ☐ Private Lesson - 195€
- ☐ Lesson in a group of 2 - 165€

Dates outlining your availability

From _____

To_____

Other: _____

Your Kitesurfing Level

- ☐ Never tried!
- ☐ I've used a kitesurfing kite
- ☐ Intermediate - I've used a board
- ☐ Experienced

Compulsory Civil Liability Insurance (Not included in the prices for courses / lessons)

- ☐ I already have insurance that covers any damage I can cause to others during my kitesurfing session.
- ☐ I would like to subscribe to the FFVL one day Contact at 5€
- ☐ I would like to subscribe to the annual School FFVL at 20€

Individual Accident Insurance is not compulsory and is strongly recommended. (included in the one day Contact insurance)

Sporting Experience
(Indicate your level 1 to 5)

- ☐ Sailing
- ☐ Snowboarding
- ☐ Wakeboarding
- ☐ Flying a kite
- ☐ Parapente

Other:

- ☐ I declare that I can swim 50m and I am at ease in an marine environment
- ☐ I will be using my own equipment (neoprene wetsuit and booties appropriate for the area)
- ☐ I declare that I am medically and physically able to take part in kitesurfing. Consequently, I release the LD Kite school from any liability in the event of an accident occurring to me or caused to a third party (of my own making following a physical or medical inaptitude or failure to follow the instructor's instructions).
- ☐ I authorise the company to use my image for marketing purposes

Any other information you would like to share with LD Kite:

How did you hear about us?

- ☐ Word-of-mouth
- ☐ Picked up a flyer
- ☐ Internet research
- ☐ Social media
- ☐ Other:

Parental Authorisation

Acting as mother ☐ father ☐ legal guardian ☐ I authorise _____ to follow kitesurfing lessons with LD Kite and certifies that he/she is medically and physically fit to take part in kitesurfing.

Date: _____ Signature _____

☐ I have read and accept the general terms and conditions of sale

Date:

_____

Signature

_____

Date of Session	Location	Lesson time	Payment

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