**SIGN UP FORM**

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**PARAGLIDING COURSE**

**Last name :**

**First name :**

**Address :**

**Telephone : Mobile :**

**E-mail :**

**Date of birth:**

**Minor child :** Parental authorization obligatory

**Paragliding course : Starting from 380 euros**

Initiation Course Progression Course

Week: from to

**Number of flights:**

You are equipped – your gear:

**Your weight :**

**Insurance**

We will give you a license-insurance **FFVL** at the beginning of the course (at your charge). If you already have insurance please come with proof of purchase. A **medical** **certificate** confirming your aptitude to practice paragliding will be asked of you (dated to less than 3 months for recently licensed flyers)

**Send to :** [**aireolecontact@gmail.com**](mailto:aireolecontact@gmail.com) **. Your participation will be validates after we receive your deposit by check for 100€ by mail sent to:** Airéole 31 chemin du laydevant 74110 Essert Romand

Payment possible by bank transfer – check – cash

**You will need to pay for the course on the first day.**

The courses take place every week during the summer vacation starting on Mondays.

For other dates please contact us.