



Delavignette Quentin / 1050 route du Village 38114 Allemond

info@delavignette.com / www.delavignette.com / +33 6 23 76 22 27

SIRET: 44469135600026 / Non assujetti à la TVA – Article 293 B du CGI

## REGISTRATION FORM

Title of the Activity:

I, the undersigned),

Last name First Name :

Date of birth :

Address :

Mobile phone: Email:

Person to notify in case of emergency:

First and last name: Mobile phone:

Civil liability insurance covering the practice of the activity designated above, without limitation of location and altitude, including search, rescue and repatriation assistance - Name and contact details of the insurer:

Any details and state of health that may present contraindications to the practice of the activity designated above (illnesses, history, treatments, apprehensions, etc.):

This data is collected for security reasons linked to the activity designated above. Concerning the management of your personal data and the exercise of your rights, see the attached general conditions of sale.

Activity Description :

Activity Dates:

Price:  Individual price: €  Group price of \_\_\_ people: € in total

This price includes: supervision, collective progress and safety equipment. It does not include: transport, accommodation, food, individual technical equipment. The practice is that the accommodation and food costs of the supervisor are the responsibility of the Client(s).

The reservation is effective once this form has been completed and signed, accompanied by payment of a deposit of 50% of the price. The full price is due at the latest before the start of the activity. Payment by cash, check or bank transfer.

By completing this registration form, I acknowledge my payment obligation. I certify that I have read the general conditions of sale communicated to me and accept them as an integral part of the contract.

Date :

Signature :