



Surval Winter Camp 2022

9 January – 14 April 2022

Application Form

To apply for a place at Surval Winter Camp please complete the Application Form and return it with payment of CHF 2'500.- which covers the Application Fee (non-refundable) CHF 500.- and Deposit CHF 2'000.-

The Deposit serves as a guarantee throughout your daughter's time at Surval Winter Camp and is refunded on completion of the course, less any 'extras', subject to no outstanding sums of money being owed to Surval Montreux.

Please be advised if any costs arise due to damage to property, this will be charged to the account of the student involved.

FEES, INSURANCES AND EXTRAS

3 weeks	CHF 8'700.-	4 weeks	CHF 11'600.-
5 weeks	CHF 14'500.-	6 weeks	CHF 17'400.-
Each additional week:	CHF 2'900.-		

ADDITIONAL PAYMENTS

Application Fee (not refundable)	CHF 500.-
Deposit	CHF 2'000.-
Health and Accident Insurance (obligatory) 3 weeks	CHF 180.-
per extra week	CHF 60.-
Ski Week (29 January – 5 February 2022)	CHF 2'500.-

PAYMENT OF FEES, INSURANCES AND EXTRAS

Payment should be made either by bank transfer to the School's account or by Western Union.

Bank: PostFinance SA, Mingerstrasse 20, CH-3030 Bern

Recipient: Surval Montreux, Route de Glion 56, CH-1820 Montreux

IBAN: CH66 0900 0000 1494 1106 5

Swift/BIC: POFICHBEXXX

Payment may also be made by credit card at a 3% charge.

Surval Winter Camp Fees cover the following:

- Class tuition
- Two days skiing each week
- One day excursion within Switzerland each week
- Loan of text books and other materials for class (unless student chooses to write in them)
- Use of facilities, library and access to the Internet
- Accommodation and all meals
- Laundry (excluding dry cleaning)
- Provision of all linen
- Residence tax (taxe de séjour)
- Return transfers from Geneva International Airport on arrival/departure dates

OPTIONAL SUPPLEMENTARY EXPENSES CHARGED AS EXTRAS

- **Unaccompanied Minors service:** CHF 60.- one way (pre-ordered by parents with airline)
- **Individual lessons:** CHF 120.-
- **Additional Skiing at Weekends:** CHF 200.-
- **Postal service for sending of visa letters:** CHF 110.- (DHL, FedEx etc)

CANCELLATION/WITHDRAWAL

- In the event of cancellation, the Application Fee and Deposit are non-refundable in all cases. Parents should ensure they have cancellation insurance.
- If formal notice of cancellation is received two months before the start of a student's stay at Surval, Camp fees will be refunded.
- If formal notice is received less than two months before the start of the student's stay, the whole fee is due.
- If a student is withdrawn by the parents from Surval Winter Camp, or if a student is expelled, the fees and deposit are not refundable.

Survall Winter Camp Application

STUDENT DETAILS

Full name as in passport _____

First name to be used in school _____ Nationality _____

Date of birth _____ Place of birth _____

Passport number _____ Passport expiry date _____

Email _____

First language _____ Other languages _____

PROGRAMME BEING APPLIED FOR

- Foundation Year/Grade 8 (age 12+) Grade 9 (age 13+) Grade 10 (age 14+)
 Grade 11 (age 15+) Grade 12 (age 16+) Surval Swiss Gap Experience (age 17–19)

PLANNED PROGRAMME DURATION

Arrival Date _____ Length of stay _____
(Weekends only, Saturday or Sunday)

PARENT/LEGAL GUARDIAN DETAILS

MAIN CONTACT

Father Mother

Other (please specify) _____

Last name _____

First name _____

Email _____

Skype _____

Mailing address _____

City _____

Postal code _____

Country _____

Home phone _____

Mobile phone _____

Office phone _____

Profession _____

Person responsible for payments _____

SECOND CONTACT

Father Mother

Other (please specify) _____

Last name _____

First name _____

Email _____

Skype _____

Mailing address _____

City _____

Postal code _____

Country _____

Home phone _____

Mobile phone _____

Office phone _____

Profession _____



HOW DID YOU HEAR ABOUT SURVAL MONTREUX?

Agent Internet search Social media Family connection Personal contact

Please specify exact source/name _____

Agent (if applicable) _____

Has your daughter been to a Surval Summer Camp? No Yes Which year? _____

GENERAL INFORMATION

Name of current school _____

Name of Principal _____

Address and country _____

Email _____

Telephone number _____ Years of attendance _____

Does your daughter have any special educational need such as dyslexia or dyspraxia? Yes No

If yes, please include the report when you return the Application Form.

APPLICATION TERMS AND CONDITIONS

We confirm our agreement with the general and financial conditions set out in this document. By signing below, we as parents (or legal guardians) agree to abide by these conditions and to respect the School's rules and regulations.

We undertake to honour this contractual agreement even when our daughter reaches the legal age of adulthood and until she leaves the School. We understand that discovery of false or incomplete information may jeopardize our daughter's right to remain at the School.

We authorise Surval Montreux to undertake the necessary action to obtain a student residence permit for our daughter who guarantees to leave Switzerland at the end of her studies.

PARENT ONE

Name (in capital letters)

Relationship to candidate

Signature _____

Date _____

PARENT TWO

Name (in capital letters)

Relationship to candidate

Signature _____

Date _____

Health Questionnaire

Full name of student _____

Height _____ Weight _____

Please answer **ALL** of the following questions. If you answer **YES** to any of the questions, please provide full details including dates, illness, severity and treatment using the space provided opposite or on a separate sheet of paper. Please make sure that the Health Questionnaire is signed and dated.

Information provided in the Health Questionnaire is shared with relevant staff when necessary. If you would like to discuss a medical issue in confidence please contact the Senior Housemistress.

Has your daughter ever suffered from:	Yes	No
1. Persistent cough, asthma, bronchitis, tuberculosis, pleurisy, pneumonia or other condition which has affected the lungs? If asthma, please provide details (e.g. inhaler needed)		
2. Any condition that has affected the heart or circulatory system?		
3. Any other condition which has affected the stomach, intestine or liver?		
4. Diabetes or any other similar disorder?		
5. Rheumatism, arthritis or any other disorder of bones or joints including the spine?		
6. Epilepsy, fainting attacks, fits or any other disease of the nervous system?		
7. Any injury, paralysis, physical defect or deformity?		
8. Any problems with eyes or ears?		
9. Depression, anxiety state, nervous illness, eating disorder or physical illness?		
10. Does your daughter have any known allergies including drugs and foods?		
11. Are there any family illness/issues which might affect your daughter's health?		
12. Does your daughter have any other illnesses not covered above?		
13. Has your daughter consulted a specialist for any other reason?		
14. Is she on any current medication? Please complete section on next page		
15. Does your daughter have any special dietary needs? Please specify if yes:		



VACCINATIONS

Please send copy of vaccination card if available. Tetanus vaccination should be up to date.

DETAILS OF ANY CURRENT CONDITION, TREATMENT AND MEDICATION

Please list prescribed medication with dosage and reason for taking (if necessary, please continue on a separate sheet of paper).

Medicine _____

Reason _____

All medicines must be handed in on arrival to the Senior Housemistress. No girl is allowed to keep any medicine in her room, or give her medicine to another student. This is an essential safety regulation.

TREATMENT AS AN EMERGENCY PATIENT

If your daughter requires emergency medical advice or treatment, do you give your permission for her to receive this?

Yes No

DECLARATION

The information provided above is to my knowledge accurate and complete.

Name (in capital letters) _____

Relationship to candidate _____

Signature _____ Date _____



Permissions Form

Full name of student _____

Please answer the questions below, sign and date the form and return it to School.

PHOTOGRAPHY AND IMAGES CONSENT

During your daughter's time at Surval Montreux, we may wish to take photographs of activities that involve her. These include trips, academic, cultural and sporting activities. The photographs may be used for displays, publications and the School website.

Professional photography or filming will only take place with the permission of the Principal and under appropriate supervision.

Photographs are taken of all staff and girls at the start of each academic year for use within the School community.

Before taking any photographs of your daughter, we need your permission. You can ask to see images of your daughter held by the School and you may withdraw your consent at any time.

	Yes	No
My daughter may have her photograph used in the School prospectus, DVDs and other printed publications that are produced for promotional purposes.		
My daughter may have her image used on the School website.		
My daughter may have her image used in other related websites including social media sites, for promotional purposes.		
My daughter may be named in the photographic images as detailed above.		

INTERNET ACCEPTABLE USE

Any student wishing to use the Surval Montreux Computer and Internet access must agree to the following and should sign in agreement below. Parents/guardians are requested to endorse their daughter's signature.

As a School user of the Internet, I agree to follow the School rules on its use. I will use the network in a responsible way and observe all the restrictions explained to me by the School. I understand that breaking any of these rules may lead to stopping access to the Internet or computer network (or both). I also understand that misuse of technology, both inside and outside School, which affects the welfare of members of the School community or the reputation of the School will be subject to disciplinary procedures.

The School reserves the right to examine or destroy any files that may be held on its computer system or to monitor any Internet sites visited.

As the parent/guardian of the above-named student, I grant permission for my daughter to use electronic mail and the Internet in School. I understand that students will be held accountable for their own actions.

Name of student _____

Signature of student _____ Date _____

Parent name (in capital letters) _____

Relationship to candidate _____

Signature _____ Date _____

OUTINGS PERMISSION

At all times girls must carry a mobile phone, fully charged and give the number to the Head of Boarding before leaving the School building.

Please indicate below if you agree or disagree to the following:

AFTER SCHOOL OUTINGS – ALL AGES

After School, girls may go down to Montreux or Vevey in small unsupervised groups.
Monday to Friday 16.30–18.45

I agree do not agree that my daughter can go to Montreux or Vevey after School.

WEEKEND OUTINGS – AGED 15 AND UNDER

During weekends, girls aged 15 and under can go to Montreux or Vevey in small unsupervised groups.
They must return by the following time: Saturday and Sunday 18.45

I agree do not agree that my daughter can be unsupervised during day trips organised by the School.

WEEKEND OUTINGS – AGED 16 AND OVER

During weekends, girls aged 16 and over can go to Geneva or the equivalent in small unsupervised groups.
They must return by the following times: Friday and Saturday 23.00, Sunday 20.30

I agree do not agree that my daughter can go out without supervision on weekends.

ACTIVITIES

After School and during the weekends, girls have the opportunity to participate in a range of activities organised by Surval Montreux. These activities may involve girls participating in small unsupervised groups.

I agree do not agree that my daughter can participate unsupervised during School activities after School and at the weekends.

Parent name (in capital letters) _____

Relationship to candidate _____

Signature _____ Date _____