



**BULLETIN OF INSCRIPTION  
TRAINING COURSES 2018**

to be returned in:

**Association Promotion Hockey**  
21, Route de saint Jean 05000 GAP  
Mail: contact@aph-hockey.com

<p>NAME of the trainee .....          FIRST NAME .....          NOT(WAS BORN) .....          SEND .....          .....          .....          ZIP CODE ..... CITY .....          Such dom .....          .port: .....          Mail: .....          CLUB .....          N license .....          POSITION    <input type="checkbox"/> Guard        <input type="checkbox"/> Center                           <input type="checkbox"/>Defender    <input type="checkbox"/> Winger</p> <p><input type="checkbox"/> Week of 8.07 to 14.07 2018  <input type="checkbox"/> Week of 15.07 to 21.07 2018  <input type="checkbox"/> Week of 5.08 to 11.08 2018  <input type="checkbox"/> Week of 12.08 to 18.08 2018  <input type="checkbox"/> Week of 19.08 in 25.08 2018</p> <p><b>chosen Formula :</b>  <input type="checkbox"/> Hours of hockey only  <input type="checkbox"/> Hours of hockey only + apartment (to fill form of booking apartment)  <input type="checkbox"/> Half-boarder with training course + apartment (to fill form of booking apartment)  <input type="checkbox"/> Half-boarder with training course  <input type="checkbox"/> Boarder with training course (only for weeks from 8 till 14 july, from 15 till 21 july, from 12 till 18 august and 19 till 25 august)</p> <p>In the event of an accident or of wounds arisen during the training course, for neglect in the regulation, the organizers cannot be considered as people in charge.</p> <p>" In the event of an accident, I authorize the people in charge to appeal to the first aids, or to make transport my child in the closest hospital complex.          In case of emergency, I give expressly the authorization to operate "</p> <p>Date _____ Signature _____</p>	<p><b>BOOKING</b>  <b>APARTMENT SUMMER, 2018</b>          to join to the bulletin of inscription</p> <p>NAME of the tenant .....          FIRST NAME .....          SEND .....          .....          .....          ZIP CODE ..... CITY .....          Such dom .....          port .....          Mail: .....</p> <p>TYPE OF APARTMENT: .....          . TRAINING COURSE OF .....          TO ..... on 2018</p> <p>. IN THE DAYTIME OF ARRIVAL:  <input type="checkbox"/> SATURDAY        <input type="checkbox"/> SUNDAY</p> <p><i>NB: possibility of renting 1 supplementary week without training course: to contact us.</i></p> <p>Apartments are situated in the feet of tracks, in the heart of the station, close to the ice rink and the businesses.</p> <p>The delivery of keys is made :          - Saturday from 4 pm till 6 pm          - Sunday from 3 pm till 5 pm          Liberation of apartments at 10 am necessarily</p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------