

## REGISTRATION FORM

Use one form per person

Please provide all of the following information, including optional preferences.

Name: (Name as exactly listed on your passport)

Sharing a room with \_\_\_\_\_

Street/Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone # \_\_\_\_\_

Cell Phone # \_\_\_\_\_ Business Phone # \_\_\_\_\_

E-Mail \_\_\_\_\_ *Important! primary means of contact*

**Ski Trip to  
The 3 Valleys  
&  
Geneva/Annecy**  
February 28-March 10  
2026

### Information Required by the T.S.A.

Passport Country of Issue: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_ Passport Number \_\_\_\_\_ Passport Expiration\* \_\_\_\_\_

**\*NOTE: If your current passport is due to expire any time prior to September 2026...GET IT RENEWED !**

### **Type of Room Accommodation in Brides-Les-Bains & Geneva:**

Single \_\_\_\_\_

Double \_\_\_\_\_

Twin \_\_\_\_\_

Triple \_\_\_\_\_

### Optional Insurance

*I understand that the cost of the optional insurance program is 7.25% of the advertised tour price (based on my accommodations & flights) and that trip insurance must be purchased no later than due date of final payment (December 31, 2025). A separate form is available to register for trip insurance.*

*I have read, understood, and accept the tour and insurance conditions listed on the "Winter Tour Conditions – 25/26" page.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

This form **MUST** be completed and returned by all participants with first payment (\$1,000). Insurance premium may also be sent. **ALL PAYMENTS MUST BE BY CHECK OR VENMO (no credit cards).** Make payments payable to "Charles E. Thompson" and send to:

CHARLES E. THOMPSON  
261 CARPENTER ROAD  
WHITINSVILLE, MA 01588

Phone: (774) 276-7210 (cell)  
E-Mail: info@skiwithcharlie.com or thompsoncharlie51@gmail.com  
Participants will receive payment confirmation by e-mail, or by U.S. Mail if no e-mail