

**BOLTON WANDERERS INTERNATIONAL ACADEMY**  
**Terms and conditions**

Bolton Wanderers International Academy **strongly** recommends the purchase of insurance coverage for travel and related travel costs, cancellation, medical, and personal property for all travelers from a broker of **your** choice.

**1. Cancellation for Convenience by You**

Should you cancel your reservation thirty (30) days or more prior to your reserved 'Date of Attendance', you shall be entitled to a refund of fifty percent (50%) of the amount already paid by you. Should you cancel your reservation less than thirty (30) days prior to your 'Date of Attendance', you shall not be entitled to any refund of monies already paid however; your booking can be transferred to another person. All voluntary or involuntary withdrawal from the camp will not incur any refund at all. Cancellation of your reservation shall be written and shall provide the name of the participant as recorded on the Registration Form.

**2. Force Majeure Event**

Either party may cancel the reservation due to a Force Majeure Event which shall include circumstances beyond the control of either party, including but not limited to: war, threat of war, political crisis, civil commotion or strife, terrorist activity, strike or industrial action, natural disaster, fire and technical problems due to closure of airports or other transport problems making it impossible or unreasonable to travel. Physical injury of participant prior to date of attendance is not a force majeure event but one reason why we urge you to obtain insurance coverage.

**3. Participant Exclusion**

Bolton Wanderers International Academy reserve the right to exclude or refuse any person at any time to any course or activity if, in the opinion of Bolton Wanderers International Academy, that person is not compatible with the general enjoyment or well being of other clients, is found bullying, misbehaving or severely disrupting the course of the camp. In this case, no refund will be given for any unexpired portion of the activity, course or tour. All expenses for this exclusion will be the responsibility of the parent's participant.

**4. Property Damages**

Bolton Wanderers International Academy will vehemently pursue any student damaging or defacing property while at the Camp and strong action will be taken against such students. Payments will be sought in full from any such student BEFORE departure to repair such damage. Bolton Wanderers International Academy reserve the right to expel any student from its centers if there is willful damage to property.

**5. Admission Age Requirements**

Bolton Wanderers International Academy is for 12 to 18 years old boys only.

**6. Forbidden Items**

Alcohol, drugs and tobacco are totally forbidden during the camp.

**7. Pocket Money**

Money could be given to the camp director or your group leader on arrival. At the end of the camp, money left over will be given back to the participant. Money can be use to buy soft drinks or souvenirs.

These terms and conditions are issued by Bolton Wanderers International Academy. By your completion and submittal of registration forms, you agree and acknowledge that you have read and agree to the terms and conditions, including the Privacy Policy, of Internet Sports Travel, Inc. as provided, and as updated from time to time, on [www.internetsportstravel.com](http://www.internetsportstravel.com) website and which includes that **INTERNET SPORTS TRAVEL HAS NO AUTHORITY OR CONTROL OVER THE OPERATION AND/OR RULES OF THE CAMP.**

### **8. Medical Expenses and Information**

All medical expenses incurred by the participant will be charge to the parent's credit card on file. Medical receipt will be given to the participant when he leaves the camp. If a participant is under medical treatment during the camp, it is strongly recommended to send with your registration a copy of the treatment being followed by the participant. If the participant takes special medications, he must give them to the educators. It is strongly recommended to mention all allergies on the Registration form.

### **9. Clothing and Equipment**

All participant clothing and equipment must be marked with the participant name. Only soccer shoes with molded cleats are allowed.

### **10. Loss and Theft**

During the camp, each participant is responsible of his own personal clothes and equipment. Bolton Wanderers International Academy declines all responsibilities in case of theft or loss.

### **11. Valuable Objects**

It is strongly recommended not to bring valuables like jewelry, walkmans, Ipods, electronic games, cameras, cellular telephones, computer laptops, team's jerseys etc.

### **12. Participant Leaving Premises**

It is forbidden to leave the camp perimeter at all times.

### **13. Liability**

Bolton Wanderers International Academy does not accept responsibility for any death, personal injury or loss of or damage to property, save to the extent that it results in our negligence. In the event of your child needing medical attention during any course they may be treated by a qualified emergency first aid coach in the first instance.

**BOLTON WANDERERS INTERNATIONAL ACADEMY  
2008 COURSE REGISTRATION FORM**

Select your session:

Camp 1 : July 6 to July 11	<input type="radio"/>	Camp 2 : July 13 to July 18	<input type="radio"/>
Camp 3 : July 20 to July 25	<input type="radio"/>	Camp 4 : July 27 to August 1	<input type="radio"/>
Camp 5: August 3 to August 8	<input type="radio"/>	Camp 6: August 10 to August 15	<input type="radio"/>

First and Last Name of Participant:

Date and Place of Birth:	Age:
Address:	Zip Code:
City, State:	Country:
Tel Number:	Person and Telephone number to contact in case of emergency:
Email address:	Cellular Number:

Does the participant have any special dietary requirements, if yes, please provide:

Does the participant take medication on a regular basis, if yes, provide details here attaching additional page if needed:

Does the participant currently have any serious illness or has had any in the past which may affect their participation in this Sports Camp, if yes, provide details here attaching an additional page if needed:

Please give contact details of the participant's local Doctor/ General Practitioner:

This Sports Camp has vigorous exercise each day. The participant has received the required medical clearance for full participation in all events:  YES  NO

Field Positions and Level:  Striker  Midfielder  Defender  Goalkeeper  
 Beginner  Good  Advanced  National

Course:  5 day residential (Sunday - Friday)  7 day residential (Sunday - Sunday)

Services:  Roundtrip Airport Transfer  I would like to be roommate with:

Arrival Airport, Airline and Flight number:	Departure Airport, Airline and Flight number:
Flight Arrival date and time:	Flight Departure date and time:

Where did you hear about the Bolton Wanderers International Academy?

Paper/magazine [ ] School [ ] Internet [ ] Radio / TV [ ] Family/friend [ ]

**The above information is correct. All fees and charges will be paid on or before the date on which they are due. I hereby give permission for the above participant to fully participate in the full range of sporting and social activities and also authorize the camp to take all necessary emergency measures in case of accident or incident that necessitate hospitalization or surgical intervention (which I will be financially responsible for) and release the camp of all Liability / responsibility. I give permission for the camp to use, eventually and for professional purpose only, pictures photos taken during the camp. I authorize the camp (if needed or requested) to drive my child to and from the airport/train station to the camp and release the camp of all liability and responsibility. I have read the Terms and Conditions and agree to the contents.**

Printed Name of Parent or Guardian:	Signature of Parent or Guardian:
Date:	

**BOLTON WANDERERS INTERNATIONAL ACADEMY  
PARENT/GUARDIAN CONSENT FORM  
FOR PLAYER EMERGENCY TREATMENT  
AND IMAGES  
PARENTAL CONSENT FORM**

I hereby give permission for my child to participate in all football related activities (playing and training) whilst he is at the Bolton Wanderers FC International Residential Camp.

I also authorise the International Academy to provide emergency treatment of any injury or illness my child may experience if qualified medical personnel consider treatment necessary and perform the treatment. This authorisation is granted only if I cannot be contacted and all reasonable effort has been made to do so.

My child and I are aware that participating in Football and associated training is a potentially hazardous activity. I assume all risks associated with participation in this sport/activity including but not limited to:

- o Falls
- o Contact with other participants
- o Contact with equipment
- o Effects of the weather
- o Traffic
- o Other reasonable risk conditions associated with this sport/activity

All such risks to my child are known and appreciated by me.

I understand this consent form and agree to abide by its conditions on behalf of my child.

The International Academy is dedicated to the welfare and safety of their young players. As part of this commitment, in accordance with the guidance issued by the FA Premier League, the only photography allowed at matches/training will be that taken by designated club officials.

Best Practice for official photographs / videos

- All children must be appropriately dressed.
- Photography should focus upon the activity not on a particular child.
- Images should where possible be recorded in groups of at least four children.
- Images published should not be accompanied by full name and personal details of the child.
- A parent / carer and the young person should have completed the consent form to give their permission for the photographs to be taken.

I give my permission for the taking and / or publication of images of my child by Bolton Wanderers International Academy.



**INTERNET SPORTS TRAVEL CARDHOLDER CHARGE AUTHORIZATION FORM**

Payment of fees for: \_\_\_\_\_  
Name of Participant(s)

Name of Sports Camp: \_\_\_\_\_ Date of Attendance: \_\_\_\_\_

This letter shall serve as authorization for **Internet Sports Travel, Inc.**, 3790 El Camino Real, PMB 2018, Palo Alto, CA 94306, USA, to charge the following amount(s):

Reservation Deposit Fee of US \$ 400 (per week reserved) X \_\_\_\_ for a total of US \$ \_\_\_\_\_  
**and** authorized for further charge prior to Date of Attendance above the Camp Fee Remaining  
Balance of US \$ \_\_\_\_\_

(if your program begins in June or July 2008, all balances are due April 30, 2008. If your program begins in August 2008, all balances are due May 31, 2008.)

**OR**

Payment in Full of US \$ \_\_\_\_\_

**to my:**

Visa     MasterCard     American Express     Diners/Enroute     Discover

Card #: \_\_\_\_\_ Expiration Date (mm/yyyy): \_\_\_\_\_

Security Code: \_\_\_\_\_

(The non-embossed 3 numbers on the back of your Visa or MasterCard or the 4 numbers on the front of Amex card.)

Cardholder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_ Email: \_\_\_\_\_

By my signature below, I agree to the above charges and agree not to 'chargeback' the fees authorized above. I further agree and acknowledge that the above credit card number may be charged should the named participant(s) require medical care as determined by the 'Sports Camp' or to pay for any damage to 'Sports Camp' property caused by the named participant(s). All fees to be in US dollars.

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_