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| --- | --- |
| Dear International Friend,Thank you for your interest in our **End of the SUMMER CAMP** which will be held in Novara from 26 to 30 August at our school IPS Ravizza. Please mark that:- your arrival should possibly be either on Sat 24th or Sun 25th- departure on Sat 31st or Sun 1st Sept |  |

In order to register you we need to collect the following information:

|  |  |
| --- | --- |
| Your name and surname |  |
| MALE/FEMALE |  |
| Languages spoken |  |
| Date/Place of birth |  |
| Nationality |  |
| Email |  |
| FB / Social Media contact |  |
| Mobile phone |  |
| Passport/ID number |  |
| PP/ID expiry date |  |
| Health Card number |  |
| Allergies/ Medicines / Diet(s) |  |
| Smoker (YES/NO) |  |
| Family habits |  |
| Pets (like/don’t like) |  |
| Hobbies/Sports |  |
| Other info |  |

Please do not buy your flight ticket until you received official confirmation from us ☺

Thank you,

the RAVIZZA SUMMER CAMP TEAM