



Bishop Wordsworth's School

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Website: www.bws-school.org.uk

Head Master: Dr S D Smallwood BSc (Hons) PhD NPQH

Dear Parents/Guardians

Please see the attached Travelers Information form. Please could i request that the form is completed and returned to VLJ@bws.wilts.sch.uk by no later than Friday April 15th.

Yours faithfully

Victoria Jaafar
Economics & Business Studies Department
vlj@bws.wilts.sch.uk

[Insert Trip Name]

Traveller Information Request Form



This form is to be completed by students and returned to your teacher.

THESE FORMS ARE NOT TO BE RETURNED TO STS, SKIPLAN, PAVILLION TOURS OR UKCONNECTION

PUPIL INFORMATION

First name
(as per passport):

Middle name
(as per passport):

Surname
(as per passport):

Gender:

DOB
(dd/mm/yyyy):

Age on departure years

PASSPORT INFORMATION

Passport number:

Issue Country

Citizenship
i.e GBR

Issue Date
(dd/mm/yyyy)

Nationality

Expiry Date
(dd/mm/yyyy)

DIETARY AND MEDICAL DETAILS

Please list details of dietary requirements and allergies

Please give details of any medical conditions and medication that needs to be taken

NEXT OF KIN INFORMATION

Name & relation:

Contact Number:

Name & relation:

Contact Number:

SKI GROUPS ONLY

Please indicate if your child would to ski or snowboard:

Ski / Snowboard ability:
(please circle)

Never skied / boarded before (A)

1-2 weeks skiing / boarding (B)

3-6 weeks skiing / boarding (C)

over 6 weeks skiing / boarding (D)

Shoe size (UK):

Weight (in kg):

Height (in cm):

Helmet size (in cm):

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