



Registration, Refund and Transfer National Office Policies

Please allow 2 business days for your request to be processed. Then, if you have not received official confirmation by email, please contact the Course Coordinator at the National Office.

You can also retrieve your confirmation form on-line 48 hours after registering by logging-in to your personal page, using your name and member number.

The CSIA, strongly suggest that you verify your course registration before making any traveling and accommodation arrangement.

Important: All CSIA courses, modules and programs have a limited number of spaces available, according to the availability of the course conductors. However, in some cases, it is possible that the course gets filled up before the deadline. In that situation, the CSIA has the right to refuse participants and to put them on a waiting list.

CSIA REFUND & TRANSFER POLICY:

Refunds and transfers must be requested in writing via email, fax or regular post.

For late cancellations, the following penalties will be applied:

- Within 2 weeks (14 days) of the start of the course: 75% of the course fee will be refunded
- Within 3 days of the start of the course or on the same day of the start of the course, or no-show: 50% of the course fee will be refunded.

For a late transfer, the following penalties will be applied:

- More than 14 calendar days of the first day of the course: No penalty.
- Within 14 calendar days of the first day of the course: \$50 penalty for courses and \$20 for Exams, Re-tests and Modules.
- Transfers and/or cancellations 72 hours prior to the course start date are subject to a 50% penalty.

At any time, the CSIA has the right to cancel any course, module and program without prior notice, and will not be responsible for any expenses incurred by the participant. Course fee will be refunded at 100%.



CSIA
Leaders in Ski Teaching

Transfer and Refund Request Form

Member number : _____

First name: _____

Last name: _____

Sexe: Female Male

Date of birth: _____

Address: _____

City: _____

Province/State: _____

Country: _____

Postal Code: _____

Phone: _____

Fax: _____

E-mail: _____

Transfer

Refund

Course registered to: _____ Location: _____ Course Date: _____

Transferring to: _____ Location: _____ Course Date: _____

Reason (Please provide a valid doctor's note)

I hereby declare having read the transfer and refund policy and understand and accept the terms and conditions outlined.

Signature: