



# Individual equipment loan form

Please fill out this form as best as possible for our secretariat and our instructors.

Equipment loan	
<input type="checkbox"/> Tandemski / Tandem'flex	<input type="checkbox"/> Dualski Piloté / Tempo Duo
<input type="checkbox"/> Uniski	<input type="checkbox"/> Hyppocampe
<input type="checkbox"/> Dualski	<input type="checkbox"/> Cross-country sledding
<input type="checkbox"/> Snow'kart	<input type="checkbox"/> Hockey sled
<input type="checkbox"/> Scarver	

• **The borrower :**

Name : .....\*      First name : .....\*

Address : .....

Phone on site : .....      E-mail : .....

**Person's disability :** Check the corresponding box(es).

<input type="checkbox"/> Paraplegia	<input type="checkbox"/> Tetraplegia	<input type="checkbox"/> Cerebral palsy	<input type="checkbox"/> Hemiplegia	<input type="checkbox"/> Disease	<input type="checkbox"/> Intellectual disability, autism
Lesion height : .....		<input type="checkbox"/> Standing	<input type="checkbox"/> Right <input type="checkbox"/> Left	_____	_____
		<input type="checkbox"/> Manuel chair		_____	_____
		<input type="checkbox"/> Electric chair	_____	_____	
Your size : ..... cm			Your weight : ..... kg		

### Desired loan days and number of hours:

Day	Exemple : monday 17/01/2025						
NB of hours desired	Exemple : 2H If possible, in the morning						

• **The Equipment:**

Model, settings and specifications (Tempo, Scarver, largueur, cover ...) : .....

Uniski, Dualski, Tempo Duo, Dualski Piloté, Scarver, Snow'kart et Cross-country sledding <i>(Indicate what applies to you)</i>						
Case size	1	2	3	4	5	6
Backrest height	Standard		Down	High	Tétra	

Is this your first reservation with Loisirs Assis Evasion? YES - NO    If yes, contact us by telephone on [contact@loisirs-assis-evasion.com](mailto:contact@loisirs-assis-evasion.com)

Special information : .....

Loisirs Assis Evasion may use the email address you provided to inform you about the progress of the association's activities. If you do not wish to receive these communications, please check the box below:       No, I don't accept

In ..... The .....      Signature :

**By signing I acknowledge having read and accept our general conditions of sale.**

**Loisirs Assis Evasion provides equipment.**  
**The association covers the costs of maintenance, repair, and replacement of the equipment.**  
**We therefore encourage you to support us by making a donation to Loisirs Assis Evasion.**  
 (All donations are tax-deductible in France)

## AMOUNT OF SECURITY DEPOSITS REQUESTED BY EQUIPMENT

The loan of adapted equipment from the association is free for individuals within the Combloux resort. Requests outside of Combloux, and all requests made by professionals or associations, will be subject to a logistical fee of €25/day. Please contact us by email to find out the amount and loan terms. Once your loan request has been submitted and approved, please contact us again three days prior to the loan to arrange the equipment delivery.

Equipment	Security deposit check required
TANDEM SKI / TANDEM'FLEX	5 000 €
UNISKI	3 000 €
SCARVER	4 000 €
DUALSKI	3 000 €
DUALSKI PILOTE	3 000 €
SNOW'KART	3 000 €
HOCKEY SLED	2 000 €
HIPPOCAMPE	2 000 €
CROSS-COUNTRY SLEDDING	2 000 €



Relevé d'Identité Caisse d'Epargne

Ce relevé est destiné à être remis, sur leur demande, à vos créanciers ou débiteurs appelés à faire inscrire des opérations à votre compte (virement, paiement de quittance, etc.).  
Son utilisation vous garantit le bon enregistrement des opérations en cause et vous évite ainsi des réclamations pour erreurs ou retards d'imputation.

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<i>c/étab</i>	<i>c/guichet</i>	<i>n/compte</i>	<i>c/rce</i>	<i>domiciliation</i>

IBAN

FR76	1382	5002	0008	0029	3265	810
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BIC

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SALLANCHES  
20 PLACE CHARLES ALBERT  
74700 SALLANCHES  
TEL : 08.20.07.58.13

Intitulé du compte **ASS LOISIRS ASSIS EVASION**  
**ASS LOISIRS ASSIS EVASION FORM**  
266 IMPASSE DE LA BOESNA  
74190 PASSY