

## Claim form

**WINTER 20...../20.....**

NUMERO DE SUIVI : \_\_\_\_\_ (RESERVE à LA SEMVAL)

Sir, Madam,

You wish to make a **claim or inform us of an incident that occurred on the ski area**. Thank you for taking some time to fill in this form.

### **What to do?**

- 1 Fill in the form as precisely as possible
- 2 Leave your completed form at the ski-pass sales points in the resort with your ski-pass and receipt (if necessary) or send the documents by post within the next 30 days to: *SEMVAL – Service reclamations - 73450 Valmeinier.*
- 3 Your claim will be dealt with within a maximum of 60 days.

### **YOUR DETAILS**

<input type="checkbox"/> Mrs		<input type="checkbox"/> Miss		<input type="checkbox"/> Mr	
NAME : of			First Name :		
Address :					
Post Code :			City :		
Country :			Phone :		
Date of claim :			E-mail :		

### **SKI PASS**

Validity of the ski-pass: beginning:	end :
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### **YOUR MESSAGE: Please explain the details of your claim**

**Written in VALMEINIER on:**

**SIGNATURE:**

**VISA SEMVAL:**

**SEMVAL –Claim Service– 73450 Valmeinier  
 All documents and justifications must be posted or handed in at the sales desk.**