



REGISTRATION FORM

Before filling out this form make sure you have read and understood the Waiver of Claims, the Terms and Conditions that apply to your trip, and familiarize yourself with the product you are about to reserve. All this information can be found on our website www.stenbergguides.com Please then fill out this form, save to your computer and send to stenbergemelie@hotmail.com

Name:

Phone:

Email:

Address

Street:

City/town:

Province/ state:

Postal/ zip code:

Country:

Trip signing up for:

Trip dates:

What is your backcountry skiing/riding experience, and what equipment are you riding? (alpine touring, telemark, or split board)

How would you rate your fitness?

Do you have any allergies or special dietary requests? If yes, please describe.

List any medical conditions or previous injuries which may affect your ability to participate in this program.

Are you taking prescription medications? If yes, please list them.

Emergency Contact Information

Name:

Phone number:

Email:

Relation:

Comments/ questions/ concerns: