



# Trip Application

Before completing this form please call our office to reserve your space(s). Within ten days of making the phone reservation please complete this form and send it in with your deposit, in the form of check, money order or credit card (unless you paid by credit card over the phone).

Your Full Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Sex \_\_\_\_\_ DOB \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Name of Trip: Main Salmon Date of Departure: \_\_\_\_\_ Number in Party: \_\_\_\_\_

5-Day  (Ending at Vinegar Creek)

3-Day Jet Back

Lodge 5-Day

Vehicle Shuttle

Add on

Charter Flights: Boise to Boise  McCall to Salmon

Other: \_\_\_\_\_

Other: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Billing address on card \_\_\_\_\_

Total Deposit \$ \_\_\_\_\_ Visa  Master Card  Discover  Check

Credit Card # (if applicable) \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVC # \_\_\_\_\_

I authorize River Time Guide Service, Inc. to charge my balance (when due) to the above credit card Signature (must match name on card) \_\_\_\_\_

Have you been on a River Time Guide Service trip before? YES  NO  If yes, when Date: \_\_\_\_\_

Please list the names of all participants in your group, excluding yourself. Please use additional paper if necessary.

Name: \_\_\_\_\_ Sex \_\_\_\_\_ DOB \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Name: \_\_\_\_\_ Sex \_\_\_\_\_ DOB \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

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Name: \_\_\_\_\_ Sex \_\_\_\_\_ DOB \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

<b>OFFICE USE ONLY</b>	Tents _____	Wet Suits _____
	Sleeping Bags _____	Life Vests Youth _____
	Sleeping Pads _____	Adult S/M _____ L/XL _____ XXL _____