



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 _____

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