



2010 Volunteer Vacations Registration

Register at www.AmericanHiking.org or send this form to 1422 Fenwick Lane, Silver Spring, MD 20910

PERSONAL INFORMATION

Name: _____

Mailing Address: _____

City/ST/Zip: _____

Home Phone: () _____ Cell: () _____

Email (required): _____

Occupation: _____

Date of Birth: _____ Gender: _____ T-Shirt Size: _____

Emergency Contact

Name: _____

Relationship: _____

Phone: _____

Cell: _____

PROJECT SELECTION *(Please list location, trip # and date)*

First Trip

1st Choice (You will be notified if your 1st choice is full)

2nd Choice

Additional 2010 Trip

1st Choice (You will be notified if your 1st choice is full)

2nd Choice

PAYMENT

American Hiking Society Members, \$245 for first trip, \$220 if registering before February 28, 2010.

Non-members, \$275 for first trip, \$250 if registering before February 28, 2010. (Includes one-year membership)

Each additional trip, \$175.

\$ _____ Total

Enclosed is my check made payable to American Hiking Society.

Charge my Visa/MC # _____ Exp. ____ / ____

Signature: _____ Date: _____

BACKGROUND

1. How did you hear about American Hiking Society Volunteer Vacations? (Please circle all that apply)

AHS Website American Hiker Internet Search Backpacker Magazine Newspaper REI
Travelocity Friend Other: _____

2. If you have participated in a Volunteer Vacation in the past, when and where?

3. Briefly describe your experience in the following:

Hiking:

Backpacking/Camping:

Trail Maintenance:

4. Skills & Certifications. (Please circle all that apply)

CPR First Aid MD/RN/EMT WFA/WFR
NOLS or Outward Bound Graduate Other:

5. Would you like information about becoming an American Hiking Society Crew Leader? YES or NO

6. Describe your physical condition and activity level.

7. List any other conditions that American Hiking Society should be aware of, that are relevant to outdoor activities, and/or that may impact your participation. (Include any current medical conditions and medications).

8. List any allergies (food, drug, insect bites):

9. Please list any special dietary needs or preferences (We may not always be able to accommodate):

I understand that I must provide all personal gear and equipment, including a backpack, tent, sleeping bag, broken-in boots, and other personal items. I understand that all trips require a registration fee and that I will receive a full refund only if the trips I have selected are filled or canceled. I can receive a refund of \$100 if I cancel at least 8 weeks prior to the start date of my project, or I can switch to another project during the same calendar year for a \$50 fee. No refund will be made if cancellation is made less than 8 weeks prior to the start date or if I fail to show up for the project. Project details and a detailed equipment list will be sent to me when my project is confirmed at least 4 weeks prior to the start date of my project. I understand that travel to and from project site is not included in registration fee. I understand that some trips may require certain additional expenses beyond the registration fee. Submitting this application signifies that I agree to the terms outlined above.
