

TRIP APPLICATION

Contact Information:

Name:	
Street Address:	
City, State, Zip Code:	
Home Phone:	Business Phone:
Cell Phone:	Fax:
E-mail:	Occupation:

For International Trips ONLY:

Passport #:	
Name EXACTLY as it appears on your passport:	
Date of Issue:	Expiration Date:
Place of Issue:	Citizenship:
Date of Birth:	Place of Birth:

Trip Information:

I would like to go on the following trip(s):
My deposit check is enclosed for \$:
<p>Call of the Wild does not provide transportation to the trip starting point, but whenever possible we facilitate carpooling and sharing of car rentals. We suggest passengers share gas costs, except for the person providing the car.</p> <p>Would you like to carpool or share car rental? Yes No If yes, would you like to provide a car? Yes No If yes, give make and model of car and number of passengers you can carry.</p>

Exercise Habits and Wilderness Experience:

<p>My exercise habits are: (please be specific; give number of times per week, mileage, type of activity, etc.)</p>
<p>Give your outdoor experience. Please circle applicable activities:</p> <p style="text-align: center;">Backpacking Hiking Skiing Camping Climbing Kayaking</p> <p>Other, specify:</p>

If your trip involves hiking or backpacking, please fill out the rest of this section

When was your last long hiking trip? Give year and number of miles:

When was your last long backpacking trip? Give year and number of miles:

Please list previous (or the last few) Call of the Wild trips and the year which you attended:

Rate yourself in your ability to hike wilderness trails. Remember that this terrain may be uneven, steep, and rocky as compared with city sidewalks or groomed paths in a park. Circle one:

Level 1: No wilderness hiking experience.

Level 2: Fair; limited day hiking experience on wilderness trails.

Level 3: Good; experienced and comfortable hiking on rocky trails, with a light day pack.

Level 4: Good, beginning backpacker.

Level 5: Very Good; competent backpacker on rocky trails.

Level 6: Excellent; experienced carrying a backpack cross-country, adept on talus/scree.

Level 7: Guide; can boulder-hop and move quickly across talus/scree with backpack.

What is your swimming ability? Circle one:

Non-swimmer; can't swim

Basic; can float, swim continuously for up to 20 minutes.

Proficient; don't swim regularly, but can swim continuously for 20 minutes or more.

Strong; competitive swimmer or swim laps regularly for exercise.

Other comments about your outdoor experience and abilities:

I will attend the pre-trip backpacking class held in Berkeley on: (date; see website, trip packet insert or call for details)

Medical and Emergency Information:

In case of emergency, please notify (name, address, phone number):

Give your age, weight and height:

What is your general physical condition?

Please list any allergies to food or drugs, or other allergies (such as bee stings) and their effects. If you are allergic to bee stings, do you carry EPI?

Cancellation Policy:

Please note that if you cancel your trip we do not give refunds. We strongly recommend that you buy Trip Cancellation Insurance, available through insurance companies and travel agents. We send out Trip Cancellation Insurance forms from Travel Guard International. You can also find them on the web at www.travelguard.com.

1. The date of your cancellation is the date we receive **written** notice (i.e., e-mail, fax, or mail) that you must cancel your trip:
 - A. If we fill the trip, we'll refund the trip cost, less \$75 fee and any nonrefundable deposits to third parties.
 - B. If we cannot fill your space, you may qualify for a credit. Your credit is good for one year from the start date of your trip and must be applied to a trip of equal or greater value than the trip you canceled. Credit can only be used as a payment on the balance *after* the deposit has been paid. Credits will be given as follows: More than 90 days before your trip, we'll give you 50% credit of your deposit and a 100% credit of all other moneys paid less nonrefundable deposits to third parties; 60-90 days before your trip, we'll give you a 50% credit of all moneys paid less nonrefundable deposits to third parties; Less than 60 days, you do not qualify for a credit.
2. If a trip must be canceled due to circumstances beyond our control such as government intervention, border closures, terrorist attack, forest fires, weather, political unrest, or closed roads, we'll reschedule or issue full credit less nonrefundable deposits to third parties.
3. If Call of the Wild cancels due to insufficient sign-ups, we will issue a full refund or a credit, as you wish. We reserve the right to cancel any trip which is not economically feasible for us to operate, and we are not responsible for additional expenses incurred by members preparing for the trip (i.e., non-refundable airline tickets, equipment, visas, and so on).

AGREEMENT TO HOLD CALL OF THE WILD, LLC HARMLESS ASSUMPTION OF ALL RISKS AUTHORIZATION TO MEDICAL AUTHORITIES

I am aware that the activities planned by Call of the Wild entail certain inherent risks and dangers. These include, but are not limited to, the hazards of traveling in mountainous, desert, and other terrain, and they include the risks of injury or illness in remote places, absence of medical facilities, injury by forces of nature, and accidents during transportation by any means.

In consideration of, and as part payment for, the right to participate in such mountain trips and other activities, and the services and provisions provided for me by Call of the Wild, I hereby accept and assume all of the above risks, and I hereby release from liability and agree to hold harmless Call of the Wild and its owners, leaders, guides, agents, and employees for any claims, liability and loss and causes of action which I now have or which may arise in the future as a result of my participation in any Call of the Wild activity. This release is to be binding on me, my heirs, executors, and all members of my family.

I hereby authorize Call of the Wild and its employees, guides and leaders to take any steps necessary for the administration of emergency medical or dental care and for rescue operations. Call of the Wild is authorized to secure, at my expense and risk, said rescue operations and emergency hospital or medical care or treatment.

I understand that Call of the Wild reserves the right to take photographic or film records of any of their trips, and hereby agree that Call of the Wild may use any such photographic or film records for promotional and/or commercial purpose.

I have read the foregoing application, Hold Harmless Agreement, Assumption of Risk, and Authorization to Medical Authorities as well as the Refunds and Cancellations policy and the current brochure which I acknowledge having received and which forms a part of this agreement, and I understand the full meaning of each, and agree to each.

Your signature:

Date:

PARTICIPANT AGREEMENT, RELEASE AND ASSUMPTION OF RISK

In consideration of the services of Call of the Wild LLC, their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "CW"), I hereby agree to release, indemnify, and discharge CW, on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that hiking, camping, and backpacking entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

The risks include, among other things: Slipping and falling; falling objects; water hazards; exhaustion; exposure to temperature and weather extremes which could cause hypothermia, hyperthermia (heat related illness), heat exhaustion, sunburn, dehydration; and exposure to potentially dangerous wild animals, insect bites, and hazardous plant life; equipment failure, and improper lifting or carrying.

Furthermore, CW employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant’s fitness or abilities. They might misjudge the weather or other environmental conditions. They may give incomplete warnings or instructions, and the equipment being used might malfunction.

2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.

3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless CW from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of CW's equipment or facilities, **including any such claims which allege negligent acts or omissions of CW.**

4. Should CW or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.

5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.

6. In the event that I file a lawsuit against CW, I agree to do so solely in the state of California, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against CW on the basis of any claim from which I have released them herein.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

Signature of Participant _____ Print Name _____

Address _____

Phone _____ Date _____

Parent or Guardian’s Additional Indemnification (Must be completed for participant’s under the age of 18)

In consideration of _____ (print minor’s name) (“Minor”) being permitted by CW to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless CW from any and all claims which are brought by, or behalf of Minor, and which are in any way connected with such use or participation by Minor.

Parent or Guardian Signature: _____ Print Name: _____

Date: _____