



Wild Departures · 709 Baseline Road, Boulder, CO 80302 · wilddepartures.com · 720-635-1380

## Participant Information Form

**Trip Name:**

**Dates:**

### CONTACT INFORMATION

**Traveler's Name** (**First/Middle/Last**; as spelled on passport):

/ /

**Mailing Address:**

**Country** (if not U.S.):

**Cell Phone:**

**Alternate Phone:**

**Email:**

### TRAVELER INFORMATION

**Age:**

**Date of Birth:**

**Sex:**

**Height:**

**Weight (must have to board charter flights):**

**Citizenship:**

**Passport #:**

**Expiration Date - Day, Month-spelled out, Year** (Passport must be valid for at least six months after arrival at destination.)

### IN CASE OF EMERGENCY

**Contact Name:**

**Relationship:**

**Home Phone:**

**Alternative Phone:**

### HEALTH AND DIET INFORMATION (**Please answer all three questions.**)

Please indicate any aspect of your health that may affect you during this trip (back pain, diabetes, allergies, epilepsy, etc.). Explain what medications and treatment are necessary and describe any allergic reactions or other side effects to medication. **If not applicable, please list N/A.**

Do you feel 100% comfortable engaging in the outdoor activities as outlined in the proposed itinerary? **If not, please explain.**

Do you have any special dietary needs, allergies, intolerances? **If so, please specify.**



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**TRIP GOALS:**

What three things do you hope to see or experience on this trip:

- 1.
- 2.
- 3.

**PHOTOGRAPHY:**

Are you interested in participating in the photography instruction offered during this trip?  Yes  No

If yes, how would you define your level of knowledge at this point:  Beginner  Intermediate  Pro

Tell us a little about the equipment you currently use or have decided to bring with you (please be specific):

Camera body (or bodies):

Lenses:

Tripod/head:

Which photo editing software do you use (if any):

How comfortable are you using photo-editing software:  Beginner  Intermediate  Expert

Please name three things you'd like to get out of the instruction given on this trip:

- 1.
- 2.
- 3.

**Signature:**

**Date:**