

17 Freetown Rd, Raymond, NH 03077 603-895-3000

Wonderfully Wild West Signup Sheet

Date

| Full Legal Name: Last: | First: | Middle: |
|---|---|--|
| Date of Birth:/ Phone Nu | ımber: home | cell |
| Address: | | |
| Email address: | | |
| Emergency contact: (Not traveling with you) | | |
| Name: Phone | e Number: | Relation: |
| Rooming with: | | |
| Room type preference:One Bed To | wo Beds (one bed is a req | uest and not guaranteed) |
| Medical: | | |
| C PapOxygen: Dietary: | Mo | bility: |
| Other Requests: | | |
| T-Shirt Size | | |
| We highly recommend travel insurance. Ask u initial sign up for this tour. Will you be purcha | | - |
| PASSPORT REQUIRED | | |
| Passport Information*: # | Issue Date:/_ | /Expiration Date:// |
| | & MUST not expire withing all name must match you | n 6 months of the trip departure date. |
| By signing below, you agree to and understan | nd our policies as stated or | n the flyer and on our website. |
| Signature: | | |

For Office Use Only: Date received: _____ Processed by: _____ ID choice received _____