

**Copper Canyon Trails  
Trip Registration Form**

**Trip Name** \_\_\_\_\_ **Trip Dates** \_\_\_\_\_

Name \_\_\_\_\_ Gender \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(as it appears on passport)  
Passport Number \_\_\_\_\_ Exp Date \_\_\_\_\_ Nationality \_\_\_\_\_  
Address \_\_\_\_\_  
(Street, city, state or province, country zip or postal code)  
Primary Phone \_\_\_\_\_ Mobile \_\_\_\_\_  
E-mail address \_\_\_\_\_  
Emergency contact info \_\_\_\_\_  
name and phone number) \_\_\_\_\_

Trip cost is based on double occupancy. I prefer a single room and tent at an additional \$300 for standard 10 day trek. Yes \_\_\_\_\_

**Important Medical and Physical Fitness Information**

Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_  
Do you exercise regularly? Explain \_\_\_\_\_

Do you dayhike(D) or backpack(B) monthly \_\_\_\_\_ yearly \_\_\_\_\_ seldom \_\_\_\_\_  
Do you have aversion to exposure from heights or experience vertigo? \_\_\_\_\_  
Are you adversely affected by extreme heat or dryness? \_\_\_\_\_

Describe medical training/wilderness experience \_\_\_\_\_

Describe physical limitations/medical conditions \_\_\_\_\_

Do you have allergies or seizures? Explain. \_\_\_\_\_

Do you have any dietary restrictions or preferences? Explain \_\_\_\_\_

Are you taking medication? If so, what? \_\_\_\_\_

Can it adversely affect your sense of balance or equilibrium? \_\_\_\_\_

How do you rate your physical condition? \_\_\_\_\_

\*\*We highly recommend that for your protection you carry travel insurance covering accidents, trip cancellation, and emergency evacuation.

I have travel insurance. Y \_\_\_\_\_ N \_\_\_\_\_  
Company \_\_\_\_\_ Policy Number \_\_\_\_\_

Deposit enclosed (\$350) \_\_\_\_\_ Balance due 60 days prior to trip departure.  
Deposit and balance can be paid by check to Copper Canyon Trails at below address, or through PayPal.com.

Where did you hear about us? \_\_\_\_\_

**Flight Information:** Arrival Date and Time \_\_\_\_\_  
Air Carrier \_\_\_\_\_ Flight Number \_\_\_\_\_ Arriving From \_\_\_\_\_  
Returning Date and Time \_\_\_\_\_ Flight Number: \_\_\_\_\_

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**Deposits, Payments, Refunds and Cancellation Policy**

A deposit of \$350 is due upon registration. The remaining balance is due in full 60 days before trip departure. If you register less than 60 days before trip departure, the entire trip cost is due at the time of registration. If we receive written notice of your cancellation 60 days or more prior to trip departure, we will return the entire trip cost minus \$50.00 admin fee. If you cancel between 30 and 59 days prior to trip departure, we will return all but the \$350 deposit. The cancellation fee per person will be 50% of trip fee if you cancel 7-29 days before trip departure. Week of departure cancellations and "No-shows" forfeit 100% of trip fee. Forfeited deposits can be applied to any other trip scheduled in the next 12 months. Copper Canyon Trails reserves the right to cancel any trip due to inadequate sign-ups to make the trip economically feasible or any other circumstances beyond our control. In such a case, we will give you a full refund of the amount paid to Copper Canyon Trails. We also reserve the right to make reasonable changes to the itinerary where deemed advisable for the safety, comfort and/or well-being of the trip participants. If changes must be made, the trip participant will be responsible for additional costs of changes. Copper Canyon Trails does not give any refunds for unused hotel rooms, meals, transportation, trek arrangements or other unused services.

**Responsibility of Participants**

Trip participants should make sure that the trip selected is appropriate to their interests and abilities. They should familiarize themselves with the trip itinerary and bring appropriate gear and clothing as advised by Copper Canyon Trails. Persons with medical problems should inform us well in advance of trip departure so that we can make changes or arrangements if necessary. The trip leader has the right to dismiss from the trip, any participant that they feel is mentally or physically incapable of completing the trip, or any participant that they feel may be a danger to themselves or other members of the trip. In such a case, no refund is given.

I, the undersigned, have carefully read and understand the above registration form and information. I agree to comply with the conditions of participation referred to in said document. I hereby warrant and represent that I am in good physical condition. I have familiarized myself with the detailed description of the trip provided to me and certify that I am physically and mentally fit to engage in this trip.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Copper Canyon Trails  
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