

Enriching lives
through Adventure!



2105 Bryn Mawr Ave
Philadelphia PA 19131
Phone: 1-888-413-5150
Fax: 1-888-595-3436
www.AdventureRec4Life.com
info@adventurerec4life.com

Adventure Vacation Registration

Trip Name _____	Date of Trip _____
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Dear Adventurer

Please complete the Application form and mail it with your deposit in order to secure your space on your desired Adventure (Please check our trips page for deposit amount). Along with your application and deposit, please download a medical release and history form, and Participant Agree, Assumption of Risk and Release of Liability form. Your trip is not secured until we receive all signed original forms. Please keep copies for your records and don't forget to read over our terms and policies.

We are dedicated to providing you with the best adventure possible and we thank you for choosing ADVENTURE RECREATION INTERNATIONAL.

NAME OF APPLICANT _____ male female

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ CELL PHONE _____

E-MAIL _____



How did you hear about ADVENTURE RECREATION INTERNATIONAL? _____

All of our Adventures require no previous experience. But to better serve you, please respond to the following questions.

Height _____ Weight _____ Shoe Size (for climbing trips-indicate Men's size) _____ Age _____

Previous Outdoor Adventure experience _____

What level swimmer are you? non-swimmer novice intermediate expert/ part fish

Other Interest _____

Outdoor Adventure goals if any (i.e. mountaineering, hiking the Appalachian Trail etc..) _____

A positive attitude, good physical condition and flexibility (P.G.F.) are all essential to fully enjoy your experience. In some cases we may encounter rain, snow, or windy conditions. We will make every effort to maintain participant safety but please keep in mind that all days are not sunny and blue. Part of experiencing the mountains, trails and cliffs is experiencing them how they experience themselves. Once you receive your gear list please follow it, as it is designed to maximize comfort on your adventure.

Remember to prepare well for your adventure, contact us with any questions you may have and be ready for your *LIFE TO BECOME ENRICHED*.

Participant Signature _____

Please Print Name _____

Date _____