

COLORADO RIVER/GRAND CANYON RESERVATION FORM

Please call for space availability before completing this form 800-992-8022 press 2

Minimum Age - Motorized Trip : 8 Years / Minimum Age - Oar Trip: 12 Years

PLEASE CHECK ONE:

Motorized Trips

_____ 3 1/2 Day Upper Canyon
 _____ 4 1/2 Day Lower Canyon
 _____ 6 Day
 _____ 7 Day
 _____ 8 Day

Oar Trips

_____ 5 1/2 Day Upper Canyon
 _____ 6 1/2 Day Lower Canyon
 _____ 12 Day
 _____ 14 Day
 _____ 16 Day

_____ 6 1/2 Day Upper
 _____ 8 1/2 Day Lower
 _____ 9 1/2 Day Lower

Group Leader: _____

Trip Date: _____

Total amount enclosed with reservation form: \$ _____

Number of people in group _____

Card Number: _____

Expiration Date: _____

Name as it appears on card: _____ CVV2 Number: _____

Cancellation Policy: A \$300 non-refundable deposit per person is required at the time of booking.

Final payment is due 60 days prior to the trip date. Once your final payment is paid, the trip cost is non-refundable. Since we are unable to make any exceptions for any reason to our cancellation policy, we strongly advise all of our passengers to obtain some type of trip cancellation insurance. Signature _____

There is an additional \$20/person Entrance Fee getting into Grand Canyon National Park (16 and older).

If you have a valid National Park Pass, please send us a copy for exemption.

One Dollar (\$1) per day per person " Pass Through Fee" is added to your balance. Accept/ Decline (please circle one)
 (This donation is passed on to groups through the Grand Canyon Fund, Inc.)

The National Park Service requires we have your full legal name (first, middle, last name) date of birth, address, weights, and telephone numbers of ALL persons requesting reservations.

1. Name: _____ D.O.B. _____ Cell Phone: _____
Address: _____ Weight: _____ Home Phone: _____
 _____ Height: _____ E-mail: _____

2. Name: _____ D.O.B. _____ Cell Phone: _____
Address: _____ Weight: _____ Home Phone: _____
 _____ Height: _____ E-mail: _____

3. Name: _____ D.O.B. _____ Cell Phone: _____
Address: _____ Weight: _____ Home Phone: _____
 _____ Height: _____ E-mail: _____

4. Name: _____ D.O.B. _____ Cell Phone: _____
Address: _____ Weight: _____ Home Phone: _____
 _____ Height: _____ E-mail: _____

If more than 4 persons, please attach additional sheet.

**PLEASE COMPLETE BOTH PAGES AND RETURN TO: WILDERNESS RIVER ADVENTURES
 P.O. BOX 717
 PAGE, AZ 86040**

YOU MAY ALSO FAX TO: (928) 645-6113

OR EMAIL TO: info@riveradventures.com

Resort Accommodations in Page, AZ Only: Wilderness will arrange your motel reservations at Lake Powell Resort. Resort confirmations will be sent with your trip instructions. **YOU WILL BE CHARGED AT THE TIME OF BOOKING.** All rooms are standard with 2 queen beds. (Please call for rates 928-645-4967)

Please reserve: For the night of: _____

1-Room for: _____
(Please list names of person in room)

1-Room for: _____
(Please list names of person in room)

Best of the Canyon - Lees Ferry to Bar 10 Ranch

I plan to arrive in **Page, AZ** on _____ the night before my trip via:
Car _____ Flight from Las Vegas _____ Phoenix _____ Bar 10 Ground transportation _____
At the conclusion of the trip I will: (Included in trip cost and prearranged by Wilderness)
Depart the Bar10 Ranch via flight to Page _____ Las Vegas _____

Upper Canyon -Lees Ferry to Phantom Ranch

I plan to arrive in **Page, AZ** on _____ the night before my trip via:
_____ My car then prearranged shuttle to South Rim by: _____
Flight from Las Vegas _____ Phoenix _____ Bar 10 Ground transportation _____
At the conclusion of the trip I will:
Depart the Grand Canyon Village by car _____ prearranged flight to Las Vegas _____

Lower Canyon - Phantom Ranch to Bar 10 Ranch

I plan to arrive in **Grand Canyon Village** on _____ the night before my trip via:
Car _____ Flight from Las Vegas with Bar 10 Transportation _____
At the conclusion of the trip I will: (Included in trip cost and prearranged by Wilderness)
Depart the Bar 10 Ranch via charter flight to Grand Canyon Airport _____ Las Vegas _____

Dietary Requirements

If you or any of the participants in your party have special dietary requirements, severe or life-threatening allergies of any kind, a multi-day rafting trip may not be suitable for you. Due to the limitations and nature of our buffet style meals, we are unable to accommodate dietary requests such as Kosher meals.

The following people in our group are:

_____	Vegetarian
_____	Vegan
_____	Gluten Free

Guests with Severe Allergies

Wilderness River Adventures takes allergies very seriously. It is very important that you describe to us the exact details of any allergies you may have, including symptoms and severity. If you have an allergy which might cause difficulty breathing, anaphylaxis or any other life threatening reaction this trip may not be suitable for you. We want to be sure you and your family are aware you are in a wilderness area. If you have a severe allergy you will be required to bring at least 2 Epi-pens on the trip. Any questions or concerns you may have please contact our office. 800-992-8022 press 2 Please list any allergies you or your group have below.
