

Clearwater Transformational Trekking LLC

413 North St, Cottonwood, ID 83522

todd@clearwatertrekking.com

208-704-9739

Seek the Sacred Himalayan Journey Registration

Participant Name: _____

Street Address: _____

City: _____

State/Province: _____

Email: _____

Passport #: _____

Height: _____

Weight: _____

Hair Color: _____

Zip: _____

Country: _____

Phone: _____

Birth Date: _____

Eye Color: _____

Please provide the following information in the event of a medical emergency:

Known medical issues: _____

Recent surgeries: _____

Current Medications: _____

Allergies: _____

Dietary Restrictions: _____

Emergency Contacts

Name: _____

Relationship: _____

City: _____

State/Province: _____

Email: _____

Zip: _____

Country: _____

Phone: _____

Name: _____

Relationship: _____

City: _____

State/Province: _____

Email: _____

Zip: _____

Country: _____

Phone: _____

Payment Info

Event Name: Seek the Sacred Himalayan Journey

Event Dates: Monday, October 7th - Saturday, October 19th, 2024

Event Cost: \$4,499.00

Deposit Amount: \$499.00 Due: 7/26/24 (Discounts may apply)

Balance Owed: \$4,000.00 Due: 8/30/24

Cancellation Policy

We understand that life happens and plans change when least expected, so cancellations may happen. However, since we use deposits to secure supplies and personnel, **deposits are non-refundable**. The **full** Balance Owed can be canceled and/or refunded **within 60 days** of the trip, and **half** the Balance Owed can be canceled and/or refunded **within 30 days** of the trip.

**I agree that my electronic signature is the legal equivalent of my handwritten signature on this document.*

Participant Name: _____

Participant Signature: _____

Date: _____

(For participants under 18 years of age)

Parent or Guardian Name: _____

Parent or Guardian Signature: _____

Date: _____