

# ALPINE EXPEDITIONS

## APPLICATION FOR ANDES SURVIVORS TRIP 2009

Please complete this application (in print) and mail to: **Alpine Expeditions, attn: Ricardo Peña , 5571 Lone Eagle Ct. Boulder, CO 80301** with a deposit of **\$1000** US DOLLARS. Make checks payable to **Alpine Expeditions** and write the name and date of the expedition on the check. **\$2450** US Dollars balance is due 90 days before departure date (see payment info sheet for more details).

Name:

Address:

Phone: (Day)

(Evening)

Email Address:

Sex:

Age:

Date of birth:

Passport number:

Place of Issue:

Date of Issue:

Occupation:

Emergency contact:

Health insurance provider:

Policy number:

State of health (all applicants must divulge any or all medical conditions which may have a bearing on the success of this trip):

Dietary restrictions (if any):

Do you have any experience riding horses (not necessary but recommended)?

Any experience hiking or mountaineering?

Describe your level of fitness and fitness program if you have any:

Signature:

Date: