

Outdoor Program Custom Trips

Custom Trip Application

Name of Contact: _____

Name of Group: _____

Email (contact): _____

Phone Number: (____) _____

Mailing Address: _____

Type of Adventure (whitewater rafting, caving, horseback riding, backpacking, canoeing, etc.)

Location of Trip (leave blank if you do not have a desired location): _____

Date(s) of Trip: _____

Number of People: _____

Additional Services (team-building, relationship building, group facilitation, etc.)

OUTDOOR

PROGRAM

RATE THE FITNESS LEVEL OF YOUR GROUP

Couch Potato 1 2 3 4 5 6 7 8 9 10 Marathon Runner

RATE THE LEVEL OF DIFFICULTY YOU WANT IN YOUR TRIP

Walk in the Park 1 2 3 4 5 6 7 8 9 10 Strenuous

The Outdoor Program will do all that it can to accommodate your requests. However, there may be some modifications made due to certain circumstances.