## **Application**



First Name:	Last N	ame:			
Street Address:	City:				
State:	Zip Co	Zip Code:			
Phone Number:	Email .	Email Address:			
Date of Birth:	Gende	er: M	F		
Military Branch (if applicable):	Service	Service Dates (уууу-уууу):			
Are you willing to share a copy of your service record (if	f applicable)?	Υ	N		
First Responder (department):	Service	e Da <mark>tes (</mark> yyy)	у-уууу):		
Gold Star Family Member (name of member):	Service	e Dates (yyy)	y-yyyy):		
Member Relationship:					
Emergency Contact Name:	Emerg	ency Contac	t Phone:		
Emergency Contact Relationship:					
Tell us about yourself, your story, short biography:					

Physical Fitness Level (sedentary, walker, works out 2-3x weekly, can't get enough)

Health Issues (if applicable):





	Is this	your first	backcountry	/ hiking	and/or	camping	trip?
--	---------	------------	-------------	----------	--------	---------	-------

Do you have experience backcountry hiking and/or camping (if yes, please elaborate on experience?

What kind of experience do you want your backpacking/camping trip to be?