



Jackson Hole Mountain Guides

Application

Prefix FirstName Middle LastName Suffix

Date of Birth: _____

Company/Organization: _____

Address 1: _____

Address 2: _____

City: _____

State: _____

Postal Code: _____

Country: _____

Email:

Main Phone number (include area code) : _____ ext _____

Alternate Phone number (include area code) : _____ ext _____

Trip Preferences

First Choice: _____

Second Choice: _____

First Choice Date: _____

Second Choice Date: _____

Do you have Family/Friends also applying?

If Yes, How many? _____

Note ; Every person must apply with an application. Give details regarding family/friends applying so our office can join the applications together when received. Names, Phone, etc.

Emergency Contact Information

Prefix FirstName Middle LastName Suffix

Main Phone number (include area code) : _____ ext _____

Alternate Phone number (include area code) : _____ ext _____

Email: _____

Emergency_Note (please specify any pertinent information) _____

Acknowledgement and Assumption of Risk: Please read our acknowledgement and assumption of risk form (http://www.jhmg.com/signup/risks_form.pdf)

Your trip: Help us make your mountain trip a special one. Any group of two achieves a group rate so you may choose your own schedule for most adventures. Call or e-mail with your questions. We strive to speak with all of our clients so we can best prepare to serve you.

Cancellation and refund policies: Please read our cancellation and refund policy (<http://www.jhmg.com/signup/cancellation.pdf>).