Middle Fork River Expeditions Reservation Form

You will be delighted you chose to join us on the Salmon River. Please fill out one form per household only. Each person must sign an Acknowledgment of Risk as well. Trip Date Deposit Amount				
Name (s)	Date of Birth	Inflatable kayak?	Paddle Raft?	Fishing?
* Please note we bring available on most da			ticipants. Inflata	ble kayaks are
Home address		City	State	_Zip
Cell phone number	E-mail a	ddress Emerg	gency Contact	Tel#
Additional e-mail ad	dresses in your ho	ousehold (for commu	ınication about y	our trip)
Are there any health If yes, please explain	•	ions we need to be a		No
Are there any special	l occasions (Birth	day, anniversary etc.) happening on t	he trip?
How did you hear ab	oout us?			
Do you have any frie	ends who want to	join the trip? Name a	and e-mail/cell p	hone below.
We look forward to p	providing you wit	h a most memorable	wilderness river	adventure.
Yours for wilderness	s, James Ellsworth	1		