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[www.selwayadventures.com](http://www.selwayadventures.com)

## RESERVATION APPLICATION

NAME _____		PHONE _____	
STREET _____		CITY & STATE _____	
ZIP _____	OCCUPATION _____	SEX _____	
Email _____	WEIGHT _____	HEIGHT _____	
AGE _____	TRIP DATES _____		

### (Deposits are Required With Application)

Are you in good physical condition? \_\_\_\_\_ Have you ever had heart trouble? \_\_\_\_\_  
 Are you allergic to certain foods, drink, etc.? \_\_\_\_\_ If so, please state \_\_\_\_\_  
 Have you ever ridden horseback? \_\_\_\_\_ If so, how recent? \_\_\_\_\_ Do you have walking  
 or hiking difficulties in rough terrain? \_\_\_\_\_ Do you require any special medication?  
 If so, please state: \_\_\_\_\_

*This information will enable us to further personalize your pack trip with your enjoyment and well-being in mind.*

### Terms:

All fees are in U.S. funds. A deposit is required with your reservation and the balance of trip is due prior to your trip leaving out. Our policy for deposits is that all monies paid are not refundable, and are considered as partial payment for the services of reserving time and space on the schedule and advance preparation of equipment and supplies. We recommend that you obtain trip cancellation insurance to protect against any unforeseen circumstances that might cause cancellation of your trip or hunt. Personal or company checks and credit cards are acceptable for deposits, however payment of the balance of fees must be in guaranteed funds (cash, money order, cashiers' check, travelers' checks or credit cards) and the balance is due before the first scheduled day of your trip.

### Assumption of Risks by Participant:

The activities that will be undertaken as a direct or indirect result of this reservation are commonly known to have various risks inherent to them. By making this reservation, I agree that I knowingly and willingly accept those risks which are inherent in this activity or any associated activity. I will not hold, nor attempt to hold, Selway Adventures or any of its agents or associates, responsible for loss, injury, or damages, as a direct or indirect result of my participation in those activities.

**I have read, fully understand, and agree to the above terms, conditions, and assumption of risks as a condition of this application.**

Signed \_\_\_\_\_ Date \_\_\_\_\_