WILDERNESS EXPEDITIONS, INC.

RESERVATION AGREEMENT TERMS

I. Purpose of this Agreement:

(1) Designate specific dates you intend to participate in a program conducted by Wilderness Expeditions, Inc. (WE)

(2) To detail the relationship between the Coordinator, the group, or individual and Wilderness Expeditions, Inc.

II. To initiate this Agreement and schedule your dates with Wilderness Expeditions:

(1) Your group must appoint a Coordinator to represent your group to WE. The Coordinator's responsibilities are:

- · Communicate the design and purposes of your program to participants in your group.
- · Distribute all materials and information to your group pertinent for your activity.
- · Supervise the process of individual registration for your participants.
- · Collect fees/payments and remit those funds, per the payment schedule, to the appropriate address.
- · Abide by the policies and procedures set forth by WE.

(2) Those participating in Wilderness Expeditions programs and activities must understand and agree to fulfill the policies and procedures set forth by Wilderness Expeditions, Inc.

- Wildemess Expeditions programs are based on principles of spiritual growth and specific outdoor activities for developing its participants. Therefore, no element or activity will be altered unless agreed upon by the Outfitter.
- Each participant must understand that while participating they must follow the directions of the Outfitter and the staff for the duration of their experience.
- . The logo and materials of Wilderness Expeditions, Inc. may not be used or reproduced without permission.

(3) Your contact for all booking and organizational information will be Wilderness Expeditions, Inc.

Wilderness Expeditions 7870 W. HWY 50, Salida, CO 81201 Phone: 1-719-539-4888 E-mail: info@wildernessexpeditions.net

(4) All scheduling requests are placed on the schedule in the order in which they are received. Your dates are reserved by the return of the completed **Reservation Form** and the appropriate **Reservation Deposit**.

(5) After completing the Reservation Form and enclosing the Reservation Deposit made payable to Wilderness Expeditions, mail them to the address listed above (page 1, item 3) unless making an electronic payment.

(6) When WE receives your Reservation Form and Deposit, you will receive confirmation via mail or email.

III. Information regarding Payments:

(1) All payments (deposit, and participant balances) will be collected by the Coordinator and paid by ONE check, money order, or electronic payment to Wilderness Expeditions. Do not send individual personal checks.

(2) The Reservation Form and Deposit reserve your "estimated" spaces.

· A Reservation Deposit of \$500.00 per group must be received by WE to secure participant spaces.

- · The Deposit will be applied to the overall balance.
- · Deposits received after February 1st must include half of the total balance.
- · Deposits received after May 1st must include full balance.

(3)Payment Schedule: Payments must be received on or before the invoiced deadlines to avoid additional fees.

• Half of the Final Balance payment must be received on or before February 1st.

· Final Balance payment must be received on or before May 1st.

- · Missed deadlines may result in remaining spaces on your reserved dates being released to those on the waiting list.
- · Payments made after the invoiced deadlines will incur an additional \$25.00 fee per person per deadline missed.
- After the May 1st deadline, the Coordinator must inquire regarding availability of participant space(s).
- Coordinators delivering 19 paid balances by May 1st will have the 20th participant made complimentary*

When making final payment for 20 people send final payment for 19.

* Fees and Complimentary Policy are subject to approval by WE each year. They are subject to change.

(4) The Participant Fee covers expenses that include: food, use of backpacking and camping equipment, required USDA Forest Service Permits, use of the base camp, journal, last night's group lodging for first 100 participants booked on that date, and a Salida Aquatic Center pass. All other expenses incurred (travel to and from Colorado, additional lodging, medical expenses, etc.) are the responsibility of the participants and their group.

The Coordinator will submit all payments according to the WE invoice policy to secure the original price. All
payments made after the invoiced deadlines will incur an additional \$25.00 fee per person per deadline missed.

(5) WE has a "No Refund" policy on all payments. Payments are transferable when adding a new participant.

IV. Other things you need to know:

(1) Resource Materials will be made available to the Coordinator that may contain:

- Coordinator Information
- The "Participant Handbook"
- · Registration & Medical Forms
- · Other organizational materials and information

(2) Every participant is required to complete the Registration Forms. These forms include:

 A personal Registration Form which includes a Release of Liability and User Indemnity Agreement, and a Medical Form which includes a medical history and a Physician's Evaluation.

Important notes regarding the Registration Forms:

- · Every participant will need a licensed physician's check-up and signature to participate.
- Participants must have their physician sign the Medical History and Physician's Evaluation statement <u>on the form</u> <u>provided</u>. School physicals, other physical forms, or any forms altered in any way cannot be substituted.
- Individuals who have not completed these forms will be disallowed from participation. Please, check all forms for signatures and completed information before departure from home!

(3) The Coordinator must communicate the individual responsibility for personal health coverage to each participant and their parent/guardian. In the event that a participant should need medical attention, the participant assumes all financial responsibility for medical expenses incurred. In the event of a participant allenss or injury, an adult from your group will be responsible to attend to that participant for the removed from an activity will be the responsibility of the individual participant. Health coverage is not mandatory for participation, but it is strongly encouraged.

(4) Youth participants under the age of 13 must be accompanied by a parent or guardian.

(5) Adult participants are defined as anyone twenty (20) years of age or older. We suggest a ratio on all teen oriented trips of no more than 2 adults per 10 teen participants. If your group has more adults, you should consider an adult or parent & child oriented trip. There must be at least one adult that participates with each scheduled group.

(6) For each teen oriented trip, the Coordinator will choose teens to serve as Crew Leaders. It is the Coordinator's responsibility to prepare selected teens for the role of crew leader. Materials will be sent to assist in this process.

(7) Each wilderness program is regulated by the USDA Forest Service to groups of no more than 20 participants. For groups totaling more than 20, multiple groups will be formed. The remainder may be added to another group. For groups totaling less than 20, additional participants may be added to your group. The staff is not a part of the regulated number. Please call 719-539-4888 or email <u>info@wildernessexpeditions.net</u> to discuss special circumstances involved in dividing your group or in combining your group with another group.

(8) Each group provides their own transportation for WE programs. After arrival, your vehicle(s) and adult drivers will provide your group with transportation to and from the activities, trailhead, etc. Vans work well for this need. If you bring a luggage trailer, plan on using it to transport backpacks and equipment for your group. Charter buses are not able to reach all areas. Before booking a charter bus, discuss this with us.

(9) You will receive a Group Profile Form that may help to determine destination selection, staff preparations, etc. Please use the form to communicate any needs or requests regarding your group.

WILDERNESS EXPEDITIONS, INC.

RESERVATION AGREEMENT

Group Name:					
Coordinator o	r Individual Partic	ipant:			
Mailing Addr	ess:				
City:		State:Zi	ip Code:		
Cell Phone: _		Work	c Phone:		
Email:					
Number of groups:		Number in eac	ch group: Male	Female	
deposit is requ	uired for each grou			ups will be formed. A separate groups totaling less than 20,	
Trip Type:	6 Day Trek	6 Day Trek & Raft	6 Day Trek & Train	5 Day Trek & Fish	
	5 Day Trek	5 Day Multi-Sport (list	your 3 choices)		
	Enha	nced Meal Package	Enhanced Gea	ar Package	
Date(s) Requested:		Al	Alternate Date(s):		
our peak of Ju	Season May - Sept ine - August. WE	reserves the right to fill pea	Saturday or Sunday (1:00 I ak booking dates before off lendar for availability. *N		
with your Re and the full	eservation Deposi balance if after N	it and corresponding pay May 1st) to Wilderness E	ment (half of the total b	before February 1st) or along valance if after February 1st, HWY 50, Salida, CO 81201. n via mail or email.	
Deposit per Group \$ 500.00			Date Paid:		
Coordinator	for the above	named group and to f	ulfill the responsibilities	ement. I agree to serve as the s as defined by Wilderness e according to the guidelines.	
Signature of	Coordinator or In	ndividual Participant		Date	

Please Make a Copy of the Reservation Agreement Form for Your Records