



148 WILLOW STREET, BISHOP, CA 93514
 760.648.1122 OFFICE 760.874.7126 FAX
 877.423.2546 TOLL FREE
 INFO@SIERRAMTNGUIDES.COM
 WWW.SIERRAMTNGUIDES.COM

REGISTRATION FORM - PLEASE COMPLETE BOTH SIDES

THANK YOU FOR BOOKING A TRIP WITH SIERRA MOUNTAIN GUIDES! WE ARE HAPPY TO MEET ALL OF YOUR MOUNTAIN GUIDING NEEDS IN THE SIERRA AND OTHER EXCITING MOUNTAIN DESTINATIONS. IN ORDER TO PROCESS YOUR REQUEST AND RESERVE A GUIDE FOR YOUR DESIRED PROGRAM, WE WILL NEED EACH MEMBER OF YOUR GROUP TO FILL OUT A REGISTRATION FORM. PLEASE BE SURE TO FILL IT OUT COMPLETELY AND ACCURATELY. FOR YOUR CONVENIENCE, YOU MAY TYPE DIRECTLY INTO THE FIELDS BELOW AND SEND IT BACK TO US BY EMAIL, OR FEEL FREE TO PRINT THIS FORM, FILL IT OUT BY HAND, AND FAX IT/MAIL IT TO OUR OFFICE. WE MUST RECEIVE THIS FORM AND AT LEAST A 50% DEPOSIT IN ADVANCE TO PROCESS YOUR BOOKING AND ASSURE YOU OF AN AVAILABLE SPACE AND/OR GUIDE. THANKS AGAIN FOR YOUR BUSINESS AND WE'LL SEE YOU SOON IN THE MOUNTAINS!

NAME OF THE TRIP/PROGRAM:	REQUESTED DATE(S):
---------------------------	--------------------

YOUR NAME:	FIRST	M.I.	LAST
------------	-------	------	------

PRIMARY PHONE #:	SECONDARY PHONE #:
------------------	--------------------

MAILING ADDRESS:			
ADDRESS	CITY	STATE	ZIP

E-MAIL ADDRESS:

PAYMENT INFORMATION

PAYMENT METHOD: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> CASH (ENCLOSED) <input type="checkbox"/> CHECK (ENCLOSED)

FOR: <input type="checkbox"/> 50% DEPOSIT <input type="checkbox"/> FULL PAYMENT <input type="checkbox"/> GEAR RENTAL	PAYMENT AMOUNT: \$
--	-----------------------

CREDIT CARD NUMBER:	CARD TYPE: <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD
---------------------	---

NAME ON CREDIT CARD:	EXPIRATION DATE (MM/YY):	3-DIGIT CVC:
----------------------	--------------------------	--------------

BILLING ADDRESS:			
ADDRESS	CITY	STATE	ZIP

IMPORTANT! PLEASE READ OUR DEPOSIT AND CANCELLATION POLICY:

FOR DOMESTIC TRIPS OF SEVEN OR FEWER DAYS IN LENGTH:

DEPOSITS: YOUR RESERVATION IS SECURED WITH A 50% DEPOSIT AND THE BALANCE IS DUE THIRTY DAYS PRIOR TO THE START OF THE PROGRAM. WE ACCEPT CASH, CHECKS, VISA, OR MASTERCARD

CANCELLATION POLICY FOR DOMESTIC TRIPS OF SEVEN OR FEWER DAYS IN LENGTH: IF YOU MUST CANCEL, FOR ANY REASON, WITH THIRTY OR MORE DAYS NOTICE YOU MAY CANCEL YOUR DATES FOR A FULL REFUND MINUS A \$50 FEE PER PERSON. WITH FOURTEEN TO THIRTY DAYS NOTICE OF CANCELLATION PRIOR TO THE START DATE OF THE TRIP YOU ARE LIABLE FOR 50% OF THE PROGRAM FEE AND WITH LESS THAN FOURTEEN DAYS NOTICE YOU ARE RESPONSIBLE FOR THE ENTIRE PROGRAM FEE.

PROGRAM RESCHEDULING: WITH MORE THAN THIRTY DAYS NOTICE YOU MAY RESCHEDULE YOUR TRIP DATES WITH NO CHARGE. WITH FOURTEEN TO THIRTY DAYS NOTICE OF RESCHEDULING YOU CAN CHANGE YOUR DATES IF OUR SCHEDULE PERMITS. IF OUR SCHEDULE DOES NOT PERMIT THE CHANGE YOU MAY KEEP YOUR ORIGINAL DATES OR CANCEL AS STATED ABOVE. SCHEDULE CHANGES ARE NOT POSSIBLE WITH LESS THAN FOURTEEN DAYS NOTICE AND WE TREAT SUCH CASES AS A CANCELLATION. WE WILL ONLY RESCHEDULE FOR THE SAME CALENDAR YEAR.

FOR TRIPS OF MORE THAN SEVEN DAYS IN LENGTH, AND INTERNATIONAL TRIPS:

DEPOSITS: YOUR RESERVATION IS SECURED WITH A 50% DEPOSIT RECEIVED AT LEAST SIXTY DAYS PRIOR TO THE START OF THE PROGRAM AND THE BALANCE IS DUE THIRTY DAYS PRIOR TO THE START OF THE PROGRAM.

CANCELLATION POLICY FOR TRIPS OF MORE THAN SEVEN DAYS IN LENGTH, AND INTERNATIONAL TRIPS: WITH SIXTY OR MORE DAYS NOTICE: YOU MAY CANCEL YOUR DATES FOR A FULL REFUND, MINUS A \$100 PROCESSING FEE PER PROGRAM. WITH THIRTY TO SIXTY DAYS NOTICE OF CANCELLATION PRIOR TO THE START DATE OF THE TRIP YOU ARE LIABLE FOR 50% OF THE PROGRAM FEE AND WITH LESS THAN THIRTY DAYS NOTICE YOU ARE RESPONSIBLE FOR THE ENTIRE PROGRAM FEE.

PROGRAM RESCHEDULING: WITH MORE THAN SIXTY DAYS NOTICE YOU MAY RESCHEDULE YOUR TRIP DATES WITH NO CHARGE. WITH THIRTY TO SIXTY DAYS NOTICE OF RESCHEDULING YOU CAN CHANGE YOUR DATES, WITHIN THAT CALENDAR YEAR, IF OUR SCHEDULE PERMITS. IF OUR SCHEDULE DOES NOT PERMIT THE CHANGE YOU MAY KEEP YOUR ORIGINAL DATES OR CANCEL AS STATED ABOVE. SCHEDULE CHANGES ARE NOT POSSIBLE WITH LESS THAN THIRTY DAYS NOTICE AND WE TREAT SUCH CASES AS A CANCELLATION.

FOR ANY PROGRAM: IF WE HAVE NOT RECEIVED YOUR BALANCE DUE WITH LESS THAN FOURTEEN DAYS REMAINING BEFORE THE PROGRAM YOU MAY BE CANCELLED FROM THE PROGRAM AND YOU MAY LOSE YOUR DEPOSIT. IF CONDITIONS OR CIRCUMSTANCES PRECLUDE RUNNING A SCHEDULED PROGRAM WE RESERVE THE RIGHT TO MAKE THE DECISION AS TO WHETHER THE PROGRAM WILL BE CANCELLED, RESCHEDULED, OR AN ALTERNATIVE PROVIDED. IN THE RARE CIRCUMSTANCE WHERE WE NEED TO CANCEL A PROGRAM YOU CAN RESCHEDULE WITHOUT A PENALTY OR RECEIVE A REFUND. IF CIRCUMSTANCES ARISE THAT FORCE US TO CANCEL A PROGRAM THAT IS ALREADY IN PROGRESS WE RESERVE THE RIGHT TO DECIDE WHETHER A CREDIT AT A PRORATED RATE OR SUITABLE ALTERNATIVE TO THE PROGRAM WILL BE ISSUED. WE ARE NOT RESPONSIBLE FOR CANCELLATION FEES OR COSTS ARISING FROM YOUR CHANGED OR CANCELLED FLIGHTS, LODGING, OR OTHER ARRANGEMENTS. WE RECOMMEND OBTAINING TRIP CANCELLATION INSURANCE FROM YOUR TRAVEL AGENT.

I HAVE READ THE DEPOSIT AND CANCELLATION POLICY, UNDERSTAND IT, AND AGREE TO ITS TERMS.

INITIALS: _____

Participation Agreement, Release, and Acknowledgement of Risk

In consideration of the services of the Sierra Mountain Guides, Inc. their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereafter collectively referred to as "SMG"), I hereby agree to release, indemnify, and discharge SMG, on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate as follows;

1. I acknowledge that my participation in alpine mountaineering, rock and ice climbing, and ski mountaineering entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

The risks include, among other things; the hazards of walking on uneven terrain and slips and falls, being struck by rock fall, icefall or other objects dislodged or thrown from above, the use of climbing ropes and equipment, the forces of nature, including lightning, weather changes, and avalanche, the risks of falling off the rock, mountain, or into a crevasse, the risks of exposure to insect bites, the risk of altitude and cold including hypothermia, frostbite, acute mountain sickness, cerebral and pulmonary edema, my own physical condition, and the physical exertion associated with this activity.

Furthermore; SMG guides have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They might misjudge the weather, or other environmental conditions. They may give inadequate warnings or instructions, and the equipment being used might malfunction.

2. I expressly agree and promise to accept and assume all the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless SMG from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of SMG's equipment or facilities, including any such Claims which allege negligent acts or omission of SMG.
4. Should SMG or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify them and hold them harmless for all such fees and costs.
5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.
6. In the event that I file a lawsuit against SMG, I agree to do so solely in the state of Nevada, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against SMG on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms

PARTICIPANT SIGNATURE:

DATE:

PRINT NAME:

PARENT/GUARDIAN SIGNATURE (IF PARTICIPANT IS UNDER AGE 18): DATE:

PHOTOGRAPHIC MODEL RELEASE

WE OFTEN LIKE TO USE PICTURES OF PARTICIPANTS ON OUR TRIPS IN BROCHURES, CARDS, OUR WEBSITE, SLIDE SHOWS, MAGAZINES, AND OTHER MEDIA AND ADVERTISING. PLEASE INDICATE HERE IF YOU AGREE THAT WE CAN USE PHOTOS OF YOU FROM OUR TRIP IN THIS MANNER.

YES, I AGREE THAT YOU MAY USE PHOTOS OF ME IN THE MANNER DESCRIBED .

INITIALS: _____