Dvorak's Trip Questionnaire (Individual or Group) BOOKED PARTY NAME _____ TRIP # _____TRIP DATE ____ RIVER: _____ CANYON _____ Phone(s) cell_ Please list individual PASSENGERS on the back of this form We request that you fill out and return email or post at least 15 days prior to your trip the enclosed: *Online Waiver / Release (1 each person) *Passenger List, *Questionnaire and *Rentals reserved.. Your information will help us organize and enhance the enjoyment of your trip. Thank you. **PARTY NUMBERS:** Adults_____Youths: 12yr. and under __ Paddle Boat: (Participating Paddler) (Passengers with Guide) Oar Boat: *Have you or anyone with you ever been on a river trip before? _____ *Do you have a request for a particular guide? _____ *Your past river experiences? Please note here any medical or physical concerns we need to be aware of for a safe, enjoyable river *Do you have any dietary requests / allergies? **Rentals:** please check your requirements on the attached rental list, giving sizes for wetsuits/boots. **Please confirm** your travel / lodging and shuttle plans: Date: Meeting Location: Pick Up Time: Arranged Accommodations or Camping: Post Trip **Vehicle Shuttle or Transportation Arrangements**: (Multi-day trips) Pre-trip_____

Post-trip

Vehicle: Make Year License #

(Contact us if we will be arranging a shuttle for you; additional cost may apply.

TRAVEL INSURANCE FOR LOSS / DAMAGE / CANCELLATION / IS A GOOD IDEA!!!

THANK YOU FOR TAKING THE TIME TO FILL THIS OUT. WE LOOK FORWARD TO SEEING YOU ALL ON THE RIVER!

DVORAK EXPEDITIONS: 17921 US Hwv. 285, Nathrop, CO 81236 (719) 539-6851worldwide or (800) 824-3795 toll free Email: info@dvorakexpeditions.com

$PASSENGER\ LIST:\ NAME\ /\ ADDRESS/\ PHONE/\ EMAIL$ Plus, Additional Information (i.e., Medical allergies, height/weight/shoe size)

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