



**WILDERNESS ADVENTURE 2009 REGISTRATION FORM
(Pre-Orientation Retreat, August 10-13)**

Name: _____

Summer Address: _____

Summer Telephone: _____ **Email:** _____

What are your reasons for attending the Wilderness Orientation?

What do you hope to get out of this experience?

Please briefly describe your experience in the outdoors. (Note: you do not need any experience or any specialized equipment to participate, but you will need to be able to backpack with a full 45 lb. load for four-five miles)

Please return this form and a \$50 non-refundable deposit by June 26th (the total cost of the program is \$300 payable in full by July 10th: Cancellations before July 31st will receive a 50% refund. No refunds will be given after July 31st) to:

Naropa University – Student Affairs
2130 Arapahoe Ave.
Boulder, CO 80302
Attn: Bob Cillo
(Please make checks payable to Naropa University)

Naropa

UNIVERSITY

Space is limited and seats are filled on a first-come, first serve basis. If the activity is filled or is under enrolled, your money will be refunded. Please call or email the Student Affairs office with any questions or concerns. Phone: 303.546.3506 or email: bcillo@naropa.edu