

SANTA MONICA MOUNTAINS BACKBONE TRAIL TREK REGISTRATION FORM MAY 5 – May 12, 2012

FEES are \$350 per person

Make check payable to SMMTC and send with this form (and liability form) to: Registrar, BBTrek 2012, Box 770, 2060-D, East Avenida De Los Arboles, Thousand Oaks, CA. 91362. Your cancelled check is your receipt

SANTA MONICA MOUNTAINS BACKBONE TRAIL TREK 2012

NAMES (PLEASE PRINT)

1. _____ Age: _____ M: _____ F: _____
2. _____ Age: _____ M: _____ F: _____

MAILING ADDRESS

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Telephone: _____ Fax: _____

E-mail: _____

FIGURE COST BELOW:

NO. OF ADULTS: _____ X \$350 \$ _____

TOTAL ENCLOSED (Make check payable to **SMMTC**) \$ _____

IMPORTANT:

Each participant listed must fill out and sign the **Liability Form** before registration is complete.

Emergency Contact Name & Address: _____

Special dietary requirements? Yes ___ No ___ Explain _____

Tee Shirt size: ___S ___M ___L ___XL

REFUND POLICY

Full refunds (minus a \$20 cancellation fee) are made if cancellations are **postmarked April 6, 2012 or earlier**. **No refunds** can be given **after April 6, 2012**. Cancellation and request for refund must be made by mail only, addressed to the registrar – or by e-mail and acknowledged by the registrar.