



REGISTRATION FORM

ONCE COMPLETED, PLEASE FAX TO 250-847-2909



Trip Date _____ Trip Cost _____

Name #1 _____ Birthdate (mm, dd, year) _____

Address _____ City _____ Prov/State _____ Zip/Postal Code _____

Phone _____ Fax _____ Email _____

Other Participants

Name #2 _____ Birthdate (mm, dd, year) _____

Name #3 _____ Birthdate (mm, dd, year) _____

Name #4 _____ Birthdate (mm, dd, year) _____

We will make reservations for you at a hotel in Smithers. Do you wish to share a room? Prefer to have individual rooms?

Prices will be subject to a fuel surcharge if aviation fuel is greater than \$1.60/litre. Guests are asked to limit their baggage weight to 70 lbs. An extra charge will be made for excess weight.

Packages Do Not Include: Transportation, meals, and accommodation prior to departure into Spatsizi, Harmonized Sales Tax (6%-12%), gratuities, fishing license (\$56.00 CAD). **Fishing licenses must now be obtained on-line at <http://www.fishing.gov.bc.ca> prior to your trip. Please be prepared to show your licenses to our expeditor before your flight to Spatsizi.**

Disclosure and Responsibility: Spatsizi Wilderness Vacations will not be held responsible or liable for any loss, injury to participants, or damage to personal property, or for any cancellations, expenses or delays incurred as a result of weather, transportation, or other conditions over which we have no control. We reserve the right to withdraw and/or cancel any excursion offered at any time and make changes or alterations in the itinerary as may be found necessary for safety and proper handling of said excursions. We make no compromise to assure a safe trip; however, outdoor activities of this nature are not entirely "risk-free". **We recommend that you secure travel and trip cancellation insurance.**

Liability Waiver: A signed waiver is a stipulation of our insurance company.

REFUNDS AND TRIP CANCELLATION INSURANCE

Due to the nature of the guide-outfitting business, we do not give refunds or credits for deposits on full trip fees, unless a replacement is found. With over 40 years experience in the lodge business, we believe trip cancellation insurance coverage is very important for travelers. We recommend you purchase trip cancellation insurance through your **travel agent** or you can contact **Lutz Financial Services, 250-542-8577**. **For a free quote visit <http://www.lutzfinancial.ca/index.php/travelinsurance/goabc>**. We recommend insurance for both the air and land portion of your trip.

PAYMENT INFORMATION

Payment can be made by cheque, bank wire transfer, or credit card. Please note there is a 3% surcharge on all credit card transactions over \$1,000.

A wire transfer information sheet is enclosed in your package that provides all the information needed by your bank to complete a wire transfer. Please complete the form and fax (250-847-2909) or email it to us so we know to expect the funds.

Credit Card # _____
<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard
Exp: _____ Name on Card _____
Signature _____
<input type="checkbox"/> I authorize the balance to be charged on the due date.
All transactions over \$1,000 will incur a 3% surcharge.

DEPOSITS AND CANCELLATIONS

A 50% deposit is required within 14 days of booking. All deposits are considered non-refundable unless a replacement is found. The final balance is due 90 days prior to trip departure. The final balance owed will be paid on the due date by:		
<input type="checkbox"/> Credit card with information provided above	<input type="checkbox"/> Cheque	<input type="checkbox"/> Wire transfer

I have read carefully and fully understand the contents of this registration form, as well as the conditions listed herein, including the cancellation and refund policies. I also understand that I must complete and sign a medical form and a release of liability prior to trip departure.

I am a Canadian resident I certify that I am not resident in Canada for purposes of the *Excise Tax Act*

Please sign this form and return with your deposit within 14 days. Thank you.

Signature _____ Date _____

Spatsizi Representative _____ Date _____