

# MOAT Registration Summer 2008

NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

What is your confirmed spring board date? \_\_\_\_\_

If you do not have a confirmed date then please go to springboard website [www.jmu.edu/onebook](http://www.jmu.edu/onebook)

Trip Preference 1, 2, 3, with 1 being the most preferred

- |  |   |
|--|---|
| <input type="checkbox"/> Session I: June 24-28 Canoeing          | <input type="checkbox"/> Session III: July 8-12 Canoeing    |
| <input type="checkbox"/> Session II: July 1-5 Backpacking        | <input type="checkbox"/> Session IV: July 15-19 Backpacking |
| <input type="checkbox"/> Session V: July 21-25 Adventure Sampler |   |

## Food Preference

- Meat                       Vegetarian                       Vegan

List any food allergies and your reaction to them: \_\_\_\_\_

## Experience

Our trips do not require any experience. However it is helpful to your leaders to have a basic idea of what adventure , camping, outdoor, experiences that you have had. Please briefly describe any adventure recreation trip you have taken and /or activities you have participated in.

## Registration

Return this form to:

Sue Lowley  
MSC 3901  
Harrisonburg, VA 22807