Group:				
Contact Name:				
Address: (incl. Postal Code)				
Telephone:		Email:		
Mobile (if available):		· · · · · · · · ·		
Alternate Contact Name (optional):			& Email:	
	nce: Feb 3-5: Fe ost preferred, blank = no		Feb 17-19:	Feb 24-26:
Number of participant	s in a cabin:	@	\$48 =	
Number of participants camping:		@	\$24 =	
			Total:	
Snowshoes required ((check one)? No:	Yes: If	yes, specify quanti	ty:
Accommodation prefe	rence (optional):			
Name(s)	of adult(s) willing to lead	a hike (optional):		
& their e	mail address(es) (if differ	rent than above):		
& their mobile telep	ohone number(s) (if differ	rent than above):		

Payment is by cash or cheque payable to '1st Merrickville Scout Group'. Registrations will be accepted at the Venturer Advisors Forum, via email to allan@yates.ca, or via the postal system. The registration form must be accompanied by payment in full for all participants. Refunds for cancellations are not guaranteed (but have always been given in the past).

Please be as generous as possible in your list of possible weekends. It is this flexibility that makes the trip work for so many people. There is no registration deadline; however, on December 7th the registrations will be processed to balance the groups across the four weekends taking into account the expressed preferences. Groups will be notified shortly thereafter as to the weekend on which they have been placed.

For further information, see www.1stmerrickville.ca/winteradventure/ or contact Allan Yates:

205 Wolford Drive Merrickville, Ontario K0G 1N0 allan@yates.ca (613) 269-3074