



## Chicks on Cracks Registration Form

I am attending CHOCS:    November 13 <sup>th</sup> /14 <sup>th</sup> <input type="checkbox"/>		
I am attending CHOCS and would like to attend the advanced self rescue clinic on November 15 <sup>th</sup> <input type="checkbox"/>		
Each event is limited to 24 participants and will be on a first come first served basis.		
Name:		
Address:		
City:	State:	Zip:
Phone - Home:	Cell:	Work:
Email address:		
State any food allergies or restrictions?		
Cost: \$410, (to include Monday with advanced self rescue clinic - \$475) Deposit: \$100 payable on registration. Balance due by October 20 <sup>th</sup> .		
Payment Method:	<input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Discover	<input type="checkbox"/> Cheque <small>Make cheque payable to Moab Desert Adventures</small>
CC#:	Exp. Date:	CVS Security Code <small>(Last 3 digits on signature strip):</small>
Name on card:		
Billing address of card:		
City:	State:	Zip:
Signature:		
Please send completed registration form and signed liability waiver with deposit to: Emma Medara Moab Desert Adventures 801 Oak Street Moab UT 84532 Please complete email questionnaire also and email to <a href="mailto:emma@moabdesertadventures.com">emma@moabdesertadventures.com</a>		
If you have any questions please contact: <a href="mailto:emma@moabdesertadventures.com">emma@moabdesertadventures.com</a> 435 260 2404		