First Year Outdoor Adventures
Registration Form

PARTICIPANT INFORMATION

Name: ________________________________________ Cell # ( _____ )_____________________________
Preferred name:______________________      Email: _____________________________________________
DOB:  _______ /_______ /_______        Age: _____    Gender: □ Male □ Female □ ______________
Address:                                                                                           
_________________________________________________________________________________________
_________________________________________________________________________________________
Please indicate your first and second choice FYOA program:
□ Backpack Week I  □ Backpack Week II    □ Colorado Canoe Week I  □ Colorado Canoe Week II
□ Multi-Sport Week I □ Multi-Sport Week II

Please provide your detailed travel itinerary for your arrival to the program (Note the specific day/date of arrival for your choice)
_________________________________________________________________________________________  
_________________________________________________________________________________________

To sign up/ get in the lottery for acceptance on to the trip, we must receive the following by the lottery cut off date:
1. This completed registration form
2. Course Payment (Check payable to: UC Regents *with drivers license number written on Check). For credit cards, please see below.
3. A properly signed “Waiver of Liability, Assumption of Risk and Indemnity Agreement”
4. A completed “Confidential Pre-Course Health Record”
5. Signed “Participant/ Program Agreement”

Forms and payment can be brought into the UCSB Recreation Center Cashier’s Office (805-893-3738) or mailed to:
UCSB Adventure Programs
UCSB Recreation Center
Santa Barbara, CA 93106-3025

Credit Cards (MC or Visa) are accepted IN PERSON at the Rec Cen Cashier’s office or via MAIL ONLY. We are not authorized to accept any other transmission including fax, phone, e-mail, or any other electronic form. If you would like to mail your credit card information you can download the mail in form at:
http://recreation.sa.ucsb.edu/adventure-programs/first-year-outdoor-adventures

Cash can only be accepted in person at the Rec Cen Cashier’s office.

Refund Policy: Once an offering is full, you will be offered a refund (less $20 service charge) only if someone pays for your spot. If the offering is NOT full:
• 30 or more days before the course date- Full refund less $20 processing fee.
• 29 to 8 days before the course date- 50% refund less $20 processing fee.
• Less than 8 days before the course date- no refunds available.

No Drugs or Alcohol: University regulations and program policies do not allow alcohol or drugs on this trip. Anyone violating this NO TOLERANCE policy will be immediately invited to leave the trip and responsible for their own transportation home. Thank you for your cooperation. Any prescription meds must be noted on the health form at time of registration.
Please help us get to know your expectations by clearly answering the following questions.

1. Why did you sign up for UCSB’s First Year Outdoor Adventures? How did you hear about us?

2. Describe any previous outdoor experience. (Such as camping, backpacking, day hiking, rock climbing, kayaking, rafting, athletics, etc.)

3. What are your current weekly fitness/exercise habits?

4. What are your expectations for your First Year Outdoor Adventure and the leaders?

5. What do you wish to accomplish during your FYOA experience? What are some personal goals?

6. Please list five words that describe you.

7. Please draw a picture of you on your First Year Outdoor Adventure (as you envision it)!