



SHOVEL PASS LODGE REGISTRATION FORM
FAX: 780-865-1553

Are you a Hiker? _____ Or A Horseback Rider? _____

Trip date	From	To:
Your Name		
# of people in your party		
Address		
City		
Province/state		
Postal / Zip Code		
Phone		
Fax		
E-mail address		
Emergency contact:	Name: _____ Phone: _____	
Food allergies? Special diet?		

How did you find us?	<input type="checkbox"/> Hiking book <input type="checkbox"/> Skyline Trail Ride Brochure <input type="checkbox"/> Jasper Park Lodge <input type="checkbox"/> Internet <input type="checkbox"/> Travel Alberta <input type="checkbox"/> Hiking club <input type="checkbox"/> Personal referral <input type="checkbox"/> Other, please specify
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ADDITIONAL COMMENTS:

THIS SECTION FOR RIDERS ONLY
Please fill out all section to help us choose the perfect horse for you!

	#1	#2	#3	#4
Height				
Weight				
Age				
Riding Experience: B: beginner I: intermediate A: advance				
How many times do you ride per year?				

Thank you!

Skyline Trail Rides Ltd
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