



2015 Glacier Registration Master Camp

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Athlete Email: _____ Date of Birth (DD/MM/YY): _____

Please check the camp you are signing up for:

() Master camp \$825.00

**If weather allows, camp access Sunday evening June 28 and depart Wednesday morning July 1.

**Access and departure from Eagle Glacier Camp is subject to weather delays, if weather does not cooperate, training will be held in Girdwood.

**Camp fee does not include helicopter transport to or from Thomas Training Center. Helicopter payment to be paid directly to Alpine Air on the day of flight, approximately \$110 per flight and arranged through APU Glacier Staff. Cost is based on full seats, may go up depending on numbers.

Total Fees \$ _____

Please complete and fax to APUNSC at (907) 564-8943

****Payments must be sent in via fax, US mail, or hand delivered to the office.**

I have read the above and understand the payment plan: _____

Payment with Check Check # _____

Credit Card Payment (circle one) Visa MasterCard Discover

Card Holder Name: _____ Credit Card #: _____

Expiration Date: _____ / _____ V Code (last 3 digits on back of card): _____

Credit card billing address (including city/zip): _____

Signature of Card Holder: _____