



AMAZON FORAYS

CHRIS AND GERRY MILLER
P.O. BOX 126 EAST HADDAM, CT 06423 USA
860-873-8286
amazonforays.com



APPLICATION FORM

Please Print

Name as it appears on your passport _____

Passport # _____ Expiration Date _____

Date of Birth _____ Age at start of trip _____

Mailing Address _____

Telephone (H) _____ (W) _____

Fax Number (H) _____ (W) _____

Height _____ Weight _____

Education _____

Profession _____

Marital Status _____ Do you smoke? _____

Please list any prescription or non-prescription medications you use: _____

So that we can properly stock the boat, please tell us what foods you eat: _____

Are you allergic to any foods or medicine? _____

What do you drink beside water? _____

What countries have you visited? _____

What languages do you speak? _____

How did you find out about us? _____

Why are you taking this trip? _____

Dates of your trip _____

A minimum of \$500 (US) deposit should accompany this application. Please make check payable to Chris Miller. Thank you!

I, the undersigned tour participant, assume all responsibility for the risks involved in this journey and agree to release Chris and Gerry Miller and The Wild Mushroom Traveling Road Show from any liability for personal loss, injury, property damage, delay or any irregularity in any vehicle or person incurred in connection with this tour and its activities.

Signed and Dated _____