Please complete and return by: _____ Page _____ of _____

Phone: 800-285-7273

CTI GROUP ADVENTURES

WISP TRIP ROSTER

BE SURE TOTAL NUMBER OF PEOPLE ON THIS FORM MATCHES NUMBER ON ROOMING LIST

Group Name: _____ **Leader Name:** _____

Equipment Rental P/U Time_____**& Date**_____

Participant Name	Age	Equipment Needs		Helmet	Lessons
SPECIAL NOTES: **1. All information must be completed.** **2. Snowboards, blades, etc. cannot be guaranteed.**		***F***	Full Ski Package	**Please indicate:** If not included in package Helmets and/or lessons are an additional charge	
		SB	Snowboard upgrade		
		B	Blades/Ski board upgrade		
		O	Has Own Equipment		
		X	Non-skier/Non-boarder		
		T	Tubing (where available)		
		Indicate only one equipment type per person.		H=helmet	Y=lesson needed N=No lesson

CTI recommends that all first-time and beginner skiers/boarders take a lesson!