

**FLTC Spring 2016 Annual Meeting – Registration Form
June 17, 18, and 19 – Montour Falls, New York**

Registration form also available at www.cayugatrailsclub.org or www.fingerlakestrail.org

Name(s) _____

Address _____

City/Town _____ State _____ County _____ ZipCode _____

Phone(s) _____

Email(s) _____

In case of emergency notify: Name _____ Relationship _____

Phone(s) _____

Local Hiking Club/Affiliation _____ End to End Badge # _____

Any special needs we should be aware of? _____

REGISTRATION FEE - non-refundable and required for any part of the weekend.

FLTC member _____ x \$17.00 = \$ _____
Non-member _____ x \$22.00 = \$ _____

MEALS & LODGING - non-refundable after June 1st

Meals & Lodging all-inclusive: 2 nights and 6 meals. **Choose RESIDENTIAL or COMMUTER**

COMMUTER – Meals only (6 meals) for Friday thru Sunday _____ x \$34.00 = \$ _____

RESIDENTIAL (due to space limitations contact Robin for availability)

RESIDENTIAL – Women’s Dorm room (12 beds) & 6 meals Friday - Sunday _____ x \$80.00 = \$ _____

RESIDENTIAL – Men’s Dorm room (12 beds) & 6 meals Friday - Sunday _____ x \$80.00 = \$ _____

RESIDENTIAL – Double room (2 beds) & 6 meals for Friday - Sunday _____ x \$100.00 = \$ _____

For double room, who is your roommate? _____

Total (Check enclosed) \$ _____

INDICATE ANY FOOD ALLERGIES, CONCERNS HERE _____

FRIDAY – PLEASE CIRCLE ONE CHOICE FOR DINNER

Dinner Buffet- Macaroni and Cheese **OR** Fish

Please CIRCLE your hike choice #1 #2 #3 #4 #5

SATURDAY – PLEASE CIRCLE ONE CHOICE FOR DINNER AND TRAIL LUNCH

Trail Lunch Veggie **OR** Ham **OR** Turkey

Buffet Dinner - Chicken Breast **OR** Stuffed Portobello Mushroom

Please CIRCLE your hike choice #6 #7 #8 #9 #10 #11 #12 #13 #14

SUNDAY – PLEASE CIRCLE ONE CHOICE FOR TRAIL LUNCH

Trail Lunch Veggie **OR** Ham **OR** Turkey

Please CIRCLE your hike choice #15 #16 #17 #18 #19 #20

Mail form & check payable to Cayuga Trails Club, c/o Robin Carlisle Peck, PO Box 244, Interlaken, NY 14847

Please read and Sign the following:

Those persons enjoying the Finger Lakes Trail (FLT) and/or activities sponsored by the Finger Lakes Trail Conference (FLTC) or any clubs conducting activities on behalf of, or in support of the FLTC, accept full personal responsibility for their own well-being, or, for the well-being of a minor when acting in the capacity of parent or guardian. Further, users of the FLT accept and understand that hiking is a rigorous activity often conducted in rugged outdoor conditions subject to variations in weather and terrain conditions which may involve the risk of injury or death, and, that we are fully responsible for our own safety and selecting activities that are consistent with our physical capabilities. I have read the ALCOHOL use guidelines and agree to abide by them.

Print Name _____ **Signature** _____ **Date** _____

Print Name _____ **Signature** _____ **Date** _____