



## Important instructions for completing Apogee's trip application

The application you requested follows this page.

You can either complete it on your computer and then print it out,  
or print it out first and fill it in by hand.

### Follow these easy steps to complete the application on your computer:

1. Scroll down and type the requested information in the corresponding field:

*EXAMPLE:* Name: John Smith

• You can move among the fields by using your mouse or the "Tab" key.

2. When you've completed the form, click your PRINT button.

PLEASE NOTE: Adobe® Acrobat® Reader® does not allow you to save your work.  
It's VERY IMPORTANT that you print out your form immediately after completing it.

3. When the application is complete, please review, sign, date, and mail with a deposit check of \$795 to:

Apogee Adventures  
PO Box 505  
Brunswick, ME 04011

If you have any questions, please call us at  
**877.700.5046 / 207.725.7025**

# apogee student application

For Office Use Only

To apply for an Apogee adventure, please submit a \$795 deposit with this completed and signed application form. Applications are processed on a first come, first served basis and are only accepted by mail. Space is limited; we encourage you to send in your application as soon as possible. Please send to: APOGEE, P.O. Box 505, Brunswick, ME 04011

Trip: \_\_\_\_\_  
Deposit: \_\_\_\_\_ Rec: \_\_\_\_\_  
ROA: \_\_\_\_\_ ACK: \_\_\_\_\_  
TIP: \_\_\_\_\_ JL: \_\_\_\_\_

**PLEASE INCLUDE A CURRENT PHOTO WITH THE COMPLETED APPLICATION.**

## Student Information

Name \_\_\_\_\_ Sex  F  M Adult T-Shirt Size:  S  M  L  XL  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ E-mail \_\_\_\_\_  
Birth Date \_\_\_\_\_ Age in June 2010 \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_  
School \_\_\_\_\_ Current Grade \_\_\_\_\_  
Sibling's name(s) and current grade(s) \_\_\_\_\_  
Mother's/Parent's Name \_\_\_\_\_ Father's/Parent's Name \_\_\_\_\_  
Occupation \_\_\_\_\_ Occupation \_\_\_\_\_  
Street Address \_\_\_\_\_ Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (w) \_\_\_\_\_ Phone (h) \_\_\_\_\_ Phone (w) \_\_\_\_\_ Phone (h) \_\_\_\_\_  
E-mail \_\_\_\_\_ E-mail \_\_\_\_\_

## References

We require the name, phone number, and e-mail of two **teachers, coaches, or advisors** who may be contacted as a personal reference. Please let these references know we will be contacting them. *Returning students do not need to list references.*

Name \_\_\_\_\_ Name \_\_\_\_\_  
Relationship \_\_\_\_\_ Relationship \_\_\_\_\_  
Phone (Day  Night  ) \_\_\_\_\_ Phone (Day  Night  ) \_\_\_\_\_  
E-mail \_\_\_\_\_ E-mail \_\_\_\_\_

## Please indicate which trip you are applying for:

First Choice: \_\_\_\_\_ Departure Date \_\_\_\_\_  
Second Choice: \_\_\_\_\_ Departure Date \_\_\_\_\_

Are you attending with a friend(s)?  NO  YES - If yes, please name: \_\_\_\_\_

Please list your hobbies, interests, sports, and extracurricular activities: \_\_\_\_\_

Please indicate your previous traveling and/or camping experiences: \_\_\_\_\_

How did you hear about Apogee? (Please check all that apply.)  Mailing  Website  Summer Camp Fair  
 Camp Referral Service  School Visit  Friend or Family Member - Please list that person(s) name for credit: \_\_\_\_\_

Names and addresses of friends/relatives who may wish to receive our catalog:

Name \_\_\_\_\_ Name \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

I am/my son or daughter is enthusiastic about participating in the program. We also understand that an enjoyable and fulfilling experience with Apogee depends on a positive attitude, a willingness to contribute to the entire group, and a desire to participate enthusiastically in the program's activities.

We understand that disruptive behavior, the use or possession of any form of tobacco, any alcoholic product or any illegal drug will result in an immediate return home, at my own expense and without refund. We have read, understand and agree to abide by the application guidelines, payment and refund policies, general information, and other Apogee terms and conditions as stated on Apogee's website under the "About Us" tab.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_ Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**A \$795 DEPOSIT MUST ACCOMPANY THIS COMPLETED APPLICATION**

Please make checks payable to: APOGEE ADVENTURES, P.O. Box 505, Brunswick, ME 04011