

2022 Pre-Orientation Wilderness Adventure Program (POWA)

Circle your preferred activity: kayaking **OR** backpacking
Please circle your preferred trip dates:
Session I: August 15 - 19 **OR** Session II: August 22-26

Legal Name:	Preferred Name:	Date:
Age at time of program: Preferred	Gender Pronoun:	
Home address:		
City:	State:	Zip Code:
Primary Phone:	Primary Email:	
	Secondary Email:	
T-shirt Size (please check one): 🔲 XXL	XL L L M S XS	
Medical conditions (allergies, current medicat	ion, illnesses, previous injuries):	
Special dietary needs (vegetarian, vegan, etc.)	:	
In the event of an emergency, please notify: _		
Relationship of person(s) to be notified:		
Emergency phone #s (please list two):		
ncidents, accidents or emergency situations. include, but are not limited to: drowning, hyp bowel distress. Although some risks listed abo	l understand that certain elements of this program mothermia, hyperthermia, broken bones, contusions, b	multi-day kayaking or backpacking trips that may lead to nay be challenging and potentially difficult. Potential risks pruises, allergic reactions, burns, animal/insect attacks, or oor activities. I understand that all efforts will be made to thout notice.
l also give Franklin Pierce University the absolu	te right and permission to use my images and words in	its promotional materials and publicity efforts indefinitely
	ist accompany this application. The balance is due tw n. Gear brought from home is subject to approval by	vo weeks prior to the first day of the program. Deposit is Program Director Doug Carty.
Method of Payment (please check one): 🔲 (Check payable to Franklin Pierce University 🔲 Vis	sa 🗖 MasterCard 📮 Discover
Please mail this completed application to:	Franklin Pierce University Pre-Orientation Wilderness Adventure 40 University Drive Rindge, NH 03461 Attn: Doug Carty	

Additional Questions? Please contact Doug Carty at:
Office (603) 899-4383 | Cell (603) 562-8026 | Fax (603) 899-4391 | Email at
cartyd@franklinpierce.edu.