



8722 S. Harrison St. Sandy, UT 84070  
 P.O. Box 4439 Sandy, UT 84091  
 877-585-2853 • Fax 877-585-2854

**FOREIGN TRIPS  
 SUPPLEMENT**

Applicant's Name: \_\_\_\_\_

Applicant's Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_ County: \_\_\_\_\_

Business Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

1. Attach a list of guides, ages, and experience and include resumes of key personnel.
2. Foreign Travel:

| COUNTRY | TYPE/ACTIVITY | LENGTH OF TRIP | LEVEL OF DIFFICULTY | GUIDE TO PARTICIPANT RATIO | NUMBER OF PARTICIPANTS |
|---------|---------------|----------------|---------------------|----------------------------|------------------------|
|         |               |                |                     |                            |                        |
|         |               |                |                     |                            |                        |
|         |               |                |                     |                            |                        |
|         |               |                |                     |                            |                        |
|         |               |                |                     |                            |                        |

3. Date of trip: \_\_\_\_\_
4. Attach a map of the location.
5. Describe local transportation. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_