

Adirondack High Adventure Trek Center – Group Application



Leader's Name and Age

Address

City/State/Zip

Phone (H)

(B)

E-mail Address

Council Name

Unit #

Trek Choices
(rank in order of preference):

Date Choices
(rank in order of preference):

1st Choice

1st Choice

2nd Choice

2nd Choice

3rd Choice

3rd Choice

Estimated Attendance: Youth

Adults

Signature

Date

Return the Trek Application and \$300.00 to:

High Adventure Trek
Seneca Waterways Council, Inc.
474 East Ave.
Rochester, NY 14607-1992

