Leave No Trace Master Course
APPLICATION
For Appalachian Mountain Club Courses

Name: _____ _____
Last First Preferred Name Date

What is your professional/volunteer position or interest related to this course? (if you work for a land management agency, please list agency and position title)_____

Address (where you would prefer correspondence be sent): Work phone: (____)_____

_____ Home phone: (____)_____

_____ E-mail_____
City State Zip Country

Indicate your 1st and 2nd choice for course selection:

1st _____ 2nd _____
date location date location

Have you ever taken an AMC course? ❒No ❒Yes, What course/ when? _____

Are you an AMC member? ❒Yes ❒No, Are you interested in becoming one?_____

How did you hear about the LNT Master Course? _____

What are your personal or professional objectives for this course?_____

_____

_____

Briefly describe your outdoor/camping/backpacking experience and skill level: _____

_____

_____

Briefly describe your teaching experience (age groups, indoor-outdoor, subjects taught, etc.): _____

_____

_____

Photo Release: *The following release will not affect your standing in the course.*

I hereby authorize the Appalachian Mountain Club (AMC) and/or parties designated by the AMC (including periodicals or other printed matter and their editors) to use my photograph for sale to or reproduction in any medium the AMC or its designees see fit for purposes of advertising, display, exhibition or editorial use.

___
Participant Signature

MAIL OR FAX COMPLETED APPLICATION TO:

Hawk Metheny- LNT Coordinator
Appalachian Mountain Club
PO Box 298
Gorham, NH 03581
Phone: (603) 466-2721 ext. 215
Fax: (603) 466-2822
hmetheny@outdoors.org