

TRAINING PARTNER SIGNUP FORM

Coach Ron Gunn's Training Programs

[PRINT, HAND FILL AND MAIL THIS FORM]

FORMAL NAME* (required for airline travel): _____

***AIRLINE SECURITY** REQUIRES THE NAME ON YOUR PHOTO ID TO MATCH YOUR TICKET. PLEASE LOOK AT YOUR DRIVERS LICENSE OR PASSPORT TO BE SURE – MANY HAVE BEEN SURPRISED WHEN THEY FINALLY DID LOOK.

NICKNAME/PREFERRED: _____

ADDRESS: _____

CITY/ST/ZIP _____

E-MAIL1: _____ CELL PH: _____

HOME PH: _____ WORK PH: _____

ROOMMATE (IF KNOWN): _____ T-SHIRT SIZE: _____

COMMENTS, INTERESTS, ATHLETIC BACKGROUND , REFERRED BY & PERSONAL GOALS (USE BACK OF PAGE IF NEEDED)

NOTE: PLEASE PROVIDE ALL THE INFORMATION ABOVE & A SEPERATE FORM FOR EACH PERSON TRAINING. ONLY THE PERSON PAYING MUST COMPLETE THE INFORMATION BELOW.

FILL ALL THAT APPLY:

- I'm *Fired Up* for the Marathon Training only, here is my check for \$ _____ for _____ person(s) at \$150.00 each for the _____ training season. [example: *2011*]
- I'm *Fired Up* for the Hike Training only, here is my check for \$ _____ for _____ person(s) at \$100.00 each for the _____ training season. [example: *2011*]

I understand this includes your coaching, full web site access, the marked and monitored courses and private consultations.. **A Training Season** includes the dates shown in the training schedule. [[SCHEDULES](#)] **Training Partners** along with trip veterans will have first option to sign up for new trips.

CHECKS PAYABLE TO: CAIRN STONE ADVENTURE TOURS

MAIL TO: RON GUNN, 142 CONIFER TRAIL, DOWAGIAC, MI 49047

Please note on the memo line: Names of additional persons check is for and which training: "Hike Training "or "Marathon Training"

