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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. _____

