



## Adventure Access Program

### Application Form

Instructions:  
Save this PDF form to your desktop. Complete the form, save again, then send it as an email attachment to the Executive Director [ed@acmg.ca](mailto:ed@acmg.ca)

#### Contact Details

Organization	<input type="text"/>		
Address	<input type="text"/>		
City	<input type="text"/>	Prov	<input type="text"/>
		Post Code	<input type="text"/>
Website Address	<input type="text"/>		

#### Contact Person

Name	<input type="text"/>
Position	<input type="text"/>
Phone Number	<input type="text"/>
Email	<input type="text"/>

#### Trip/Course Details

Choose Type Of Trip	<input type="text"/>
Choose Length Of Trip	<input type="text"/>
Choose Location	<input type="text"/>
Specific Destination (optional)	<input type="text"/>

#### Guide/Instructor

If you have a particular guide/instructor in mind, please specify

**REQUEST RATIONALE**

Please describe why you are seeking a subsidy for this type of activity for your organization.

**TRIP PURPOSE**

Please describe the purpose of the requested trip, mentioning how it fits into your organization's broader programming, skill progression etc.

**PARTICIPANT SUITABILITY**

Briefly describe the ages, fitness level, outdoor experience, outdoor skill level and any other participant characteristics that will help us ensure the trip is appropriate.

**FINANCIAL NEED**

Please describe your organization's financial need with respect to this event. Note that this will only be used in deciding among similar applications.

Financial need is best described as:

**Note: Organizations must be able to cover all non-guiding/instructional expenses and supply 1 volunteer for every 6 participants.**

**Once your application is reviewed, you will be informed of our decision by a representative of the ACMG within 3 weeks of application deadline.**

**Questions? Please contact the ACMG Executive Director [ed@acmg.ca](mailto:ed@acmg.ca)**