



Three Rivers Whitewater Guide Training Course Application

Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Day Phone: _____

Evening Phone: _____

Emergency Phone: _____

E-mail Address: _____

Do you have a Driver's License? Yes / No

Driver's License Number: _____

Driver's License Class: _____

Do you have any further permissions, restrictions, or endorsements on your license? If so what are they?

How did you hear about our course?

Do you have any previous rafting or whitewater experience? What, when, and where?

How well can you swim? (circle one) Poor Good Excellent

Do you have any Life Guard Experience?

Why do you wish to become a whitewater guide?

Do you have any skills or previous training that you feel would be beneficial to you as a whitewater guide?

What are your hobbies and interests?

What is your current first aid certification?

Job history - Please list any previous employment that might be relative to your training:

Comments:

Mail or Fax to:

Three Rivers
P.O. Box 10 / 2265 US Route 201
West Forks, ME 04985
207-663-2104 / Fax 207-663-4413