



Rafting & Jeep Trail Tours

50 Animas View Dr., Durango, CO 81301
Phone: 970-247-4789 ~ Fax: 970-382-0545
www.Mild2WildRafting.com

Shuttle Information Form

Group coordinator: _____
of total vehicles : _____
#1 make, model, year: _____
#1 License plate#: _____
Alarm Y/N, info: _____
Keys to be left where? : _____
Phone #: _____
Cell#: _____
Email Address to send receipt:

#2 Owner: _____
#2 make, model, year: _____
#2 License plate#: _____
Alarm Y/N, info: _____
Keys to be left where?: _____

#3 Owner: _____
#3 make, model, year: _____
#3 License plate#: _____
Alarm Y/N, info: _____
Keys to be left where?: _____

#4 Owner: _____
#4 make, model, year: _____
#4 License plate#: _____
Alarm Y/N, info: _____
Keys to be left where?: _____

Please write additional vehicles on separate paper.
Fax this sheet (and additional sheets) to 970-382-0545
Cancellation Policy: In order to receive an 85% refund, a written notice of cancellation must be submitted no later than 14-days before scheduled departure.

I hereby agree to the terms of this contract and assure that the vehicle has liability insurance.
Name of insurance carrier: _____
Signature: _____
Date: _____

**Rates and Important Info:
Please Read and Check**

1. Hwy 60 to 288 - \$194.25 first vehicle, \$141.95 thereafter

- All vehicles must be left with enough gas to travel 100 miles. Tribal store and gas station are no longer open.
- Fax vehicle information portion to our office & leave in the coordinator's car.
- Please meet daily manager at our parking lot at 9:30am. The lot is on the Salt River Access Road (200 yards from Hwy turn-off on right). Look for Mild to Wild Rafting sign. Alternate meeting point is second camp (3 miles down Salt River access rd.) at 12 o'clock or most evenings.
- If you can't meet us personally, put all keys on left front tire and leave the info sheet at our parking lot kiosk in Shuttle Box.
- The car is in sound operating condition. Each driver must complete and sign insurance/waiver agreement form.
- **Date & time of put in and takeout****
Put in: _____
Takeout: _____

*The vehicle will be at take out when you arrive, but not necessarily delivered that day.

- Payment Info – Credit card#**
_____-_____-_____-_____
Expiration date: ____/____
Name as appears on card:

Billing Address for card:
Street: _____
City: _____ State: _____
Zip: _____

Emergency Contact # (person not on trip)
Name: _____ Phone: _____

**** PLEASE BRING THIS SHEET WITH YOU TO THE PUT-IN AND GIVE TO GUIDES. If guides are not available, slip paper into our drop slot with your keys. Please blacken out your credit card information before submitting for to guides /drop box.**