

Northeast Wisconsin Paddlers (NEWP, Inc.)

Apostle Islands 2021

Event Form - Complete for Each Individual



Participant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: home: _____ cell: _____ work: _____

ACA # _____ e-mail: _____

Have you taken the NEWP class? Yes _____ No _____

Location: _____ Date: _____

Kayak: Make: _____ Model: _____ Color: _____

Bow & stern bulkheads: Yes _____ No _____

If No list floatation system: _____

List safety equipment you expect to bring: _____

Contact person & relationship _____

Phone: home: _____ cell: _____

work: _____ e-mail: _____

Family, friends you would travel or camp with: _____

Event(s) you would help with or special skills? Other comments: _____

Please include the following:

- 1 If NOT a NEWP & ACA member:
 - a. NEWP membership form (\$10 fee)
 - b. ACA membership waiver (\$40 fee)
- 2 This event form
- 3 ACA Event waiver for this event (1 per trip)
- 4 Event fee (\$25 per trip)
- 5 Make check payable to "NEWP, Inc."
- 6 Mail to: NEWP Treasurer
1247 E Shady Ln
Neenah, WI 54956

Please check which trip(s)
you plan to attend:

Trip 1 Aug. 12-15

Trip 2 Aug. 26-29

Trip 3 Aug. 30 - Sep. 2

By: 05/04/2021