LEAVE NO TRACE MASTER COURSE
APPLICATION
For Appalachian Mountain Club Courses

Name: _____ _____
Last First Preferred Name Date

What is your professional/volunteer position or interest related to this course? (if you work for a land management agency, please list agency and position title)_____

Address (where you would prefer correspondence be sent):

_____

_____
City State Zip Country

Work phone: (____)_____

Home phone: (____)_____

E-mail_____

Indicate your 1st and 2nd choice for course selection:

1st _____ 2nd _____
date location date location

Have you ever taken an AMC course? ❒No ❒Yes, What course/ when? _____

Are you an AMC member? ❒Yes ❒No, Are you interested in becoming one?_____

How did you hear about the LNT Master Course? _____

What are your personal or professional objectives for this course?_____
_____
_____

Briefly describe your outdoor/camping/backpacking experience and skill level: _____
_____
_____

Briefly describe your teaching experience (age groups, indoor-outdoor, subjects taught, etc.): _____
_____
_____

Briefly describe your previous experience with Leave No Trace principles:_____
_____

Photo Release: *The following release will not affect your standing in the course.*

I hereby authorize the Appalachian Mountain Club (AMC) and/or parties designated by the AMC (including periodicals or other printed matter and their editors) to use my photograph for sale to or reproduction in any medium the AMC or its designees see fit for purposes of advertising, display, exhibition or editorial use.

_____
Participant Signature

MAIL OR FAX COMPLETED APPLICATION TO:

Hawk Metheny- LNT Coordinator
Appalachian Mountain Club
PO Box 298
Gorham, NH 03581
603-466-2721 x8115
Fax: (603) 466-2822
AMCLNT@outdoors.org