**Information**

The First Year Trip is a weeklong backpacking adventure in the beautiful Pecos Wilderness Area of New Mexico. Join upper class, experienced OU Honors student guides as well as some of your fellow incoming Honors freshmen for a week of fresh air, philosophical conversations around a campfire, and no showers!

The program is open to all members of the Class of 2023 who are 18 by August 4, 2019. If you have no prior experience, don't worry! No previous experience is required; however, the trip requires being in good physical condition. Many participants come having never spent a night in the woods. Every small group is led by both male and female OA Leaders who are OU students and will teach you many of the skills needed to camp/backpack. If you have special needs, please contact us directly to talk about them.

Registration is **limited**. Spaces will be allocated on a **first-come, first-serve basis**. Submitting a registration form does **not** guarantee a spot on the First-Year Trip.

**Cancellation Policy**

All cancellations must be submitted by the listed cancellation dates via e-mail to oa@ou.edu.

- July 1 and before: Full Refund
- July 2 to July 14: 50% Refund
- July 15 and later: No Refund

**Cost**

Please enclose a check or money order for **$500.00** payable to “The University of Oklahoma”. Please note that registration is limited. To ensure your spot, we suggest you **turn in your application as soon as possible**.

**Important Dates**

- **Deadline to Apply**
  - July 20th, 2019
- **Check in**
  - Sunday August 4, 2019
    - 7:30 – 8:00 AM
    - OU Honors College
- **Trip Dates**
  - Depart: August 4th
  - Arrive back @Honors College: August 11th (early AM)

**Itinerary**

- Day 0: Bus to Jack’s Creek Campground
- Day 1: Acclimation Day @Jack’s Creek
- Day 2: Hike to first backcountry campsite
- Day 3: Hike to Truchas Peak
- Day 4: Summit Truchas (optional)
- Day 5: Hike to Pecos Baldy
- Day 6: Summit P. Baldy (optional), hike back to Jack’s Creek, Depart from J. Creek
- Day 7: Arrive early AM, August 11th.

**Completed Applications**

Send this application along with your payment (a check made payable to The University of Oklahoma), to:

Honors College
Outdoor Adventure Program
1300 Asp Ave., Rm #160
Norman, OK 73019

**Deadline to Apply: July 20th, 2019**
(But please apply early as spaces fill fast)

An email will be sent as confirmation for your participation in the program. If you do not receive this confirmation e-mail by July 21st, please contact us to confirm that we received your application. If enrollment is filled, we will notify you, and place you on our waiting list.

**Questions**

If you have any questions, please contact us at oa@ou.edu.

An informational guide is available online, with specific information on what items to bring, where/when to arrive, and other important info and FAQs at:

[http://www.ou.edu/content/honors/specialprograms/outdooradventure.html](http://www.ou.edu/content/honors/specialprograms/outdooradventure.html)

*OA does not discriminate based on race, ethnicity, sex, creed, religion, sexual orientation, national origin, or disability.*
Honors College Outdoor Adventure  
First-Year Trip

Personal Information Form

Name:

Preferred Nickname:

OU E-mail*:  
* For confirmation and correspondence purposes. A confirmation email with additional information will verify your registration.

Home (Permanent) Address:

Birthday:

Will you be 18 by August 4, 2019?  Y  N

T-Shirt Size:  S  M  L  XL  XXL

Special Needs:
- Vegetarian / Vegan (circle)
- Disability (please provide a letter detailing your needs)
- Food Allergies:
- Other:

Note that it is key to your safety and the safety of the whole group to fill out the medical form accurately and completely. Please be specific about the severity of your allergy- if you can eat things that could have traces of your allergy-and if you carry an epi-pen. Thank you!

Looking at the gear list, what equipment would you need to borrow? Please check all that apply. Equipment is free to rent, but there is a limited number available.
- Backpack
- Sleeping Mat
- Sleeping Bag
- Pack Cover
- Trekking Poles (note that these are not required)

OU ID:

Gender*:  Male  Female  Other

Height:

Weight:

Alt. Summer Mailing Address (if different)

Home Phone:  (  )

Cell Phone:  (  )

**Be aware that there is no cell reception at Jack's Creek Campground**

Important Contact Information

Nicolette Nicar and Will O'Donnell, OA Staff  
Sponsors, will remain at Jack's Creek Campground  
Email: nnicar@ou.edu; willodonnell03@ou.edu

Santa Fe National Forest Office  
Phone: (505) 438-5300

Pecos Ranger Station  
District Ranger: Steve Romero  
PO Drawer 429  
Pecos, NM 87552  
Phone: (505) 757-6121

Las Vegas Ranger Station  
Phone: (505) 425-3534
1. Which best sums up your experience with camping and hiking?
   A. I’ve never been
   B. I’ve been camping/hiking a few times
   C. I go camping/hiking several times per year
   D. I have been on a multi-day backpacking trip (not car camping)
   E. I am very comfortable and adept in the backwoods

2. What is the farthest that you have hiked at one time in the past few months?
   A. I don’t do cardio exercises
   B. 1-4 miles
   C. 4-7 miles
   D. 8+ miles

3. What is the most difficult terrain you have encountered?
   A. Paved walking trails/sidewalks
   B. Flat, well-maintained dirt
   C. Some rocky terrain with varying elevation
   D. Rough terrain with many steep changes in altitude

4. Participants will be divided into three groups of varying route difficulty / hiking speed. Which group would you prefer to be in? Keep in mind that grouping is based on compatible skill level and physical compatibility.
   A. Easy-Moderate, slower pace
   B. Moderate, medium pace
   C. Strenuous, faster pace & longer distance

5. Gourmet food does not exist on the trail. Which best describes what you will eat?
   A. I only eat things I see made on the Food Network
   B. I only eat well-balanced, prepared food
   C. I will eat most things especially when I am hungry
   D. Is it edible? Yes? Okay, I will eat it then

6. Mark where you would fall on this spectrum pertaining to your outdoor physical capabilities

   ────── | ──── | ──── | ──── | ──── ────
   I don’t exercise               Walk the dog / equivalent               Able to run 3 miles               Like to run 3 miles               Cardio-intensive Sport

   ──── | ──── | ──── | ──── | ──── ────
   Jabba the Hutt                     |                                   |                                   |                                   | Mountain Goat
Honors College Outdoor Adventure
First-Year Trip

7. What are you looking to get out of the Outdoor Adventure trip?

8. Intended major(s):

9. What physical activities do you do and how often?

10. Do you have outdoor experience? If yes, what kind and how much? If no, what interests you about going into the outdoors?

11. What is your most memorable outdoor experience?

12. What is the most inspiring thing you’ve ever heard/read?

13. Is there anything else that we should consider when placing you into a group? (ex. speed preferences, weight of backpacks, break regularity)

14. What questions do you have for us before the trip?
In the event of an emergency, I permit the University to share the following information with emergency response personnel.

Name: _____________________________________________ Date of Birth: ____________________________________

Name of Insurance Policy Holder (Primary Insured): _________________________________________________________

Health Insurance: _____________________________________________ Insurance Phone: _________________________

Chronic Illness: _____________________________________________________________________________________

Treating Physician: __________________________________________________________________________________

Date of Last Tetanus Shot: ____________________________________________________________________________

Allergies (include severity, if you carry an epi-pen, and medications used for treatment):
____________________________________________________________________________________________________
____________________________________________________________________________________________________

Medications: (include dose and frequency):
____________________________________________________________________________________________________________
____________________________________________________________________________________________

Other Pertinent Info:
____________________________________________________________________________________________________
____________________________________________________________________________________________________

MEDICAL TREATMENT AUTHORIZATION

_______(Initial) I authorize the University of Oklahoma to act on my behalf in any medical emergency.

Emergency Contact:

Name ____________________________________________________________

Address __________________________________________ City ___________ State _____ Zip _____________

Work Phone ____________________ Home Phone ____________________ Cell Phone ____________________

Additional Emergency Contact or if parent or guardian cannot be reached:

Name ____________________________________________________________

Address __________________________________________ City ___________ State _____ Zip _____________

Work Phone ____________________ Home Phone ____________________ Cell Phone ____________________

*This Sheet Should Accompany Student on Any Trip

File Name: Medical Information Form
University of Oklahoma Norman Campus

WAIVER and RELEASE of LIABILITY for OFF CAMPUS

This is a legal and binding agreement which, when signed, will permanently limit your ability to recover from the University for injuries or losses you may cause or sustain as a result of participation in off-campus activities.

The University of Oklahoma is a state educational institution. References to the University of Oklahoma include its Board of Regents, officers, agents, faculty, employees, volunteers, students, UOSA, and administrative organizations.

I [print your name]__________________ freely choose to participate in the Trip/Activity **Honors College Outdoor Adventure First Year Backpacking Trip**, which may include the following activities: **Backpacking, camping, filtering water, cooking with backcountry stoves, summiting mountains**

I understand that the University of Oklahoma is not an agent of and has no responsibility for any third party that may provide services including food, lodging, travel, or equipment. The University of Oklahoma has not reviewed the qualifications of the activity organizer or sponsor, and does not endorse or sponsor the program or its safety or quality.

I agree to inform myself about the potential dangers of the area I am traveling to and precautions I should take, including reviewing the State Department Consular Travel Information at http://www.travel.state.gov and the Centers for Disease Control Travelers Information at http://www.cdc.gov/travel/ for health and immunization information, and any other information that the Activity organizer, sponsor, or the University may provide.

Despite precautions, accidents and injuries can and will occur. I understand that the Activity and transportation may be dangerous and that I may be injured and/or lose or damage personal property as a result of participation in the Activity. Therefore, **I FULLY AND COMPLETELY ASSUME ALL RISKS RELATED TO THE ACTIVITIES** including death, injury, illness, or loss from accidents, theft of or damage to personal belongings.

**Medical Treatment Authorization**

(Initial) I authorize the University of Oklahoma to act on my behalf in any medical emergency.

To the fullest extent permitted by law, on behalf of myself, my spouse, heirs, representatives, executors, administrators, and assigns, I agree to forever RELEASE, INDEMNIFY, HOLD HARMLESS and COVENANT NOT TO SUE the University of Oklahoma from any cause of action, claim, or demand, including one related to bodily injury, property damage, death, or accident arising out of or related to my participation in the Activity.

I assure the University of Oklahoma that I have adequate health insurance to provide for any medical needs or costs that may result from my participation in the Activity.

My signature below indicates that I have read, understood, and freely signed this agreement, which shall take effect as a sealed instrument. I further certify that my date of birth is ______________(month/day/year), and that my present age is ______________, and that I am otherwise legally competent to sign this agreement.

This agreement shall be construed and enforced in accordance with the laws of the State of Oklahoma, and I consent to the jurisdiction of this state. I expressly agree that this waiver and release is intended to be as broad and inclusive as permitted and that if any portion is held invalid, the remainder shall continue in full legal force and effect.

Printed Name: _______________________________
Signature: __________________________________
Date: ______________________________________
Address: ___________________________________
Phones(s): __________________________________

If participant under age 18:
Parent’s Printed Name: ________________________
Parent’s Signature: ___________________________
Date: ______________________________________
Address: ___________________________________
Phones(s): __________________________________

FileName: Waiver and Release Off Campus- 08/11/2009
University of Oklahoma Student Rights and Responsibilities Code

The University of Oklahoma Honors College Outdoor Adventure is a university-sponsored trip for incoming honors students. We expect behavior from our participants that is in line with that outlined by the OU Student Rights and Responsibilities Code. It is with this code that you will be held accountable and outside of which Outdoor Adventure will not be held accountable. Please make sure that you read and understand what is outlined, the code can be found here:
http://www.ou.edu/content/dam/studentlife/documents/AllCampusStudentCode.pdf

Print and sign your name below indicating that you have read and understand that you are responsible to uphold what is outlined in OU’s Student Rights and Responsibilities Code, any violations of the code and any behavior that could endanger the safety of students, staff or faculty on the trip, can result in expulsion from the program at the expense of the participant.

________________________________________
Printed Name

________________________________________
Signature