

BACKCOUNTRY/WILDERNESS USE PERMIT APPLICATION



[NOTE TO PARKS: The fields in the "Applicant Information Section" below and records retention statement in the footer are mandatory for every park to show on their form. You may not change any fields in the list or add any fields to the list. Changes or additions must be approved by OMB through the Bureau Information Collection Clearance Officer, Phadrea Ponds [970-267-7213].

APPLICANT INFORMATION (All Fields in this Section are Mandatory for Every Park)						
When approved by NPS park o	fficial, this single-	visit permit aut	horizes:			
Last Name	^I Middle Initial					
Street or Physical Address						
City State/Province Postal Code Country						
NOTE TO PARKS: You may select from the menu of information fields below to customize your park-specific permit, <i>with the exception of the fields in the "Applicant Information Section" above and records retention statement in the footer which are mandatory for every park to show on their form, you <u>do not</u> have to use and may remove any of the remaining fields. You <u>may not change</u> any fields <u>or add</u> any fields to the list. Some fields may need to be replicated multiple times to accommodate multiple responses (e.g., method of travel, emergency points-of-contact, itinerary, etc.) Changes or additions must be approved by OMB through the Bureau Information Collection Clearance Officer, Phadrea Ponds [970-267-7213].</i>						
		MISCELLANE	OUS INFORMA	TION		
Contact Phone Ho Ce Wa		dress				
Date of Birth Fax	Date of Birth Fax Driver's License/Identification ## Issuing State or Province Issuing Country USA Other					
Do you have an America the Be If "Yes", pass #:			Do you have a If "Yes", pass a		cess or Senior Pass? Yes No	
Group/Organization Type (Boy/ Youth Camp, etc.)	Girl Scouts, SUF	, Church,	No. of Permits	Requested (Large	e Groups, Multiple Leaders)	
Group Name		No. of Trips F	Requested		No. of People Per Trip	
Commercial Guided Trip? Yes No	No. of Pe	ople in Party	No. of Youth <	Age {#}	No. of Adults > Age {#}	
Names of Group Members						
Frequent Hiker Membership			idy a member		No thanks	
(Waives the \$ permit fee for months from date of purch	or Seec)		roll me for	years	Use hiker credit on file	
Commercial Use Authorization		\$ Research Pe	rmit and Reporti	ng System (RPRS	l 6) Permit #	
Emergency Point-of-Contact Name	Family Friend Colleague	Emergency F Phone Numb	Point-of-Contact per		Emergency Point-of-Contact City/State/Province/Country	
Will you bring a service dog?	Yes No					
Have you previously completed	or received a ma	andatory permi	t orientation or b	oriefing? Yes	No If yes, when:	
Have you read and agree to all	need to know inf	ormation?	Yes No			

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contected by the NDC to porticipate in	-	-	experience. Are you willing to be		
contacted by the NPS to participate in	tuture visitor surveys a	Ind/or social science studies?			
TYPE OF BACKCOUNTRY/WILDERNESS USE REQUESTED (Check All That Apply) ** Prohibited in Wildemess Areas (Exceptions may apply to previously established use of aircraft or motorboats pursuant to the Wildemess Act, Sec. 4(d)(1))					
Camping [Backpacking	Mountaineering	Fishing		
Hiking [Rafting	Mountain Climbing	Hunting		
Canoeing	Packrafting	Rock Climbing	Motorboating **		
Cross Country Skiing	Kayaking	Bouldering	Mountain Biking **		
Snowshoeing	Sea Kayaking	Canyoneering	Snowmobiling **		
Snowboarding	Drift boat floating	Scuba Diving	ATVOHV Use **		
Pack and Saddle Stock Use	Dog Mushing/Sledd	ing 🔲 Sail boating	Other		
		TRANSPORTATION	25		
Filed marked with ** are prohibited in Wildemess Areas (Exceptions may apply to previously established use of aircraft or motorboats pursuant to the Wildemess Act, Sec. 4(d)(1))					
Motor Vehicle(s) (Including ORVs and	nd Motorcycles) **	Snowmobile(s) **			
State/Province Registration/	/Plate #	State/Province	Registration/Plate #		
Make Model		Make	Model		
Color Rental?	🗌 Yes 🔲 No	Color	Rental 🗌 Yes 🗌 No		
Parking Location	Parking Location Parking Location				
Aircraft **		Watercraft			
Registration N-Number			ft(s), packraft(s), drift boat(s), motorized		
Make Model		vessel(s), sailboat(s), other:	ft(s), packraft(s), drift boat(s), motorized		
Make Model Number Color			ft(s), packraft(s), drift boat(s), motorized		
Make Model Number Color Landing Area (Drop Off)		vessel(s), sailboat(s), other: Type Number	Colors		
MakeModelNumberColorLanding Area (Drop Off)Landing Area (Pick Up)		vessel(s), sailboat(s), other: Type Number Make Model Length Horsepow	Colors		
MakeModelNumberColorLanding Area (Drop Off)Landing Area (Pick Up)Commercial Air TaxiYesNo		vessel(s), sailboat(s), other: Type Number Make Model Length Horsepowr State/Province	Colors er **		
MakeModelNumberColorLanding Area (Drop Off)Landing Area (Pick Up)		vessel(s), sailboat(s), other: Type Number Make Model Length Horsepow State/Province Launch Location	Colors er ** Hull Registration #		
MakeModelNumberColorLanding Area (Drop Off)Landing Area (Pick Up)Commercial Air TaxiYesNo		vessel(s), sailboat(s), other: Type Number Make Model Length Horsepow State/Province Launch Location	Colors er ** Hull Registration # Launch Date		
Make Model Number Color Landing Area (Drop Off) Landing Area (Pick Up) Commercial Air Taxi Yes No Name of Company EQUIPME	E NT (Check All That Ap	vessel(s), sailboat(s), other: Type Number Make Model Length Horsepow State/Province Launch Location Take Out Location Trailer Parking Location oply & Indicate Quantity Where	Colors er ** Hull Registration # Launch Date Take Out Date Rental I Yes I No Appropriate)		
Make Model Number Color Landing Area (Drop Off) Landing Area (Pick Up) Commercial Air Taxi Yes No Name of Company EQUIPME Field	ENT (Check All That Ap	vessel(s), sailboat(s), other: Type Number Make Model Length Horsepowr State/Province Launch Location Take Out Location Trailer Parking Location	Colors er ** Hull Registration # Launch Date Take Out Date Rental Yes No Appropriate) Section		
Make Model Number Color Landing Area (Drop Off) Landing Area (Pick Up) Commercial Air Taxi Yes No Name of Company EQUIPME Field	ENT (Check All That Ap Is marked with * are ref Fields marked with ** a	vessel(s), sailboat(s), other: Type Number Make Model Length Horsepowe State/Province Launch Location Take Out Location Trailer Parking Location oply & Indicate Quantity Where Ferenced in the Special Notices	Colors er ** Hull Registration # Launch Date Take Out Date Rental Yes No Appropriate) Section		
Make Model Number Color Landing Area (Drop Off) Landing Area (Pick Up) Commercial Air Taxi Yes No Name of Company EQUIPME Field	ENT (Check All That Ap Is marked with * are ref Fields marked with ** a	vessel(s), sailboat(s), other: Type Number Make Model Length Horsepow State/Province Launch Location Take Out Location Trailer Parking Location oply & Indicate Quantity Where ferenced in the Special Notices are prohibited in Wildemess Are	Colors er ** Hull Registration # Launch Date Take Out Date Rental Yes No Appropriate) Section pas		
Make Model Number Color Landing Area (Drop Off) Landing Area (Pick Up) Commercial Air Taxi Yes No Name of Company EQUIPME Field Approved Bear Resistant Food St	ENT (Check All That Ap Is marked with * are ref Fields marked with ** a	vessel(s), sailboat(s), other: Type Number Make Model Length Horsepower State/Province Launch Location Take Out Location Trailer Parking Location Oply & Indicate Quantity Where Serenced in the Special Notices are prohibited in Wildemess Are Bear Spray	Colors er ** Hull Registration # Launch Date Take Out Date Rental Yes No Appropriate) Section eas		
Make Model Number Color Landing Area (Drop Off) Landing Area (Pick Up) Commercial Air Taxi Yes No Name of Company EQUIPME Field Approved Bear Resistant Food St Avalanche Transceiver(s)	ENT (Check All That Ap Is marked with * are ref Fields marked with ** a	vessel(s), sailboat(s), other: Type Number Make Model Length Horsepower State/Province Launch Location Take Out Location Trailer Parking Location Trailer Parking Location State Area Gerenced in the Special Notices Area Bear Spray Avalanche Shovel(s)	Colors er ** Hull Registration # Launch Date Take Out Date Rental Yes No Appropriate) Section as Electric Bear Fence Avalanche Probe Pole(s)		
Make Model Number Color Landing Area (Drop Off) Landing Area (Pick Up) Commercial Air Taxi Yes No Name of Company EQUIPME Field Approved Bear Resistant Food St Avalanche Transceiver(s) Camp Stove(s)	ENT (Check All That Ap Is marked with * are ref Fields marked with ** a torage Container(s)	vessel(s), sailboat(s), other: Type Number Make Model Length Horsepower State/Province Launch Location Take Out Location Trailer Parking Location Trailer Parking Location State Notices are prohibited in Wildemess Are Bear Spray Avalanche Shovel(s) Climbing Helmet(s)	Colors er ** Hull Registration # Launch Date Take Out Date Rental Yes No Appropriate) Section eas Electric Bear Fence Avalanche Probe Pole(s) Climbing Rope(s) (length)		
Make Model Number Color Landing Area (Drop Off) Landing Area (Pick Up) Commercial Air Taxi Yes No Name of Company EQUIPME Field Approved Bear Resistant Food St Avalanche Transceiver(s) Camp Stove(s) Compass	ENT (Check All That Ap Is marked with * are ref Fields marked with ** a torage Container(s)	vessel(s), sailboat(s), other: Type Number Make Model Length Horsepower State/Province Launch Location Take Out Location Trailer Parking Location Trailer Parking Location Provinces poly & Indicate Quantity Where Ferenced in the Special Notices are prohibited in Wildemess Are Bear Spray Avalanche Shovel(s) Climbing Helmet(s) GPS Device(s) —	Colors er ** Hull Registration # Launch Date Take Out Date Rental Yes No Appropriate) Section Section Pas Electric Bear Fence Avalanche Probe Pole(s) Climbing Rope(s) (length) Maps		
Make Model Number Color Landing Area (Drop Off) Landing Area (Pick Up) Commercial Air Taxi Yes No Name of Company	ENT (Check All That Ap Is marked with * are ref Fields marked with ** a torage Container(s)	vessel(s), sailboat(s), other: Type Number Make Model Length Horsepower State/Province Launch Location Take Out Location Trailer Parking Location Trailer Parking Location Sply & Indicate Quantity Where Gerenced in the Special Notices are prohibited in Wildemess Are Bear Spray Avalanche Shovel(s) Climbing Helmet(s) GPS Device(s) Whistle	Colors er ** Hull Registration # Launch Date Take Out Date Rental Yes No Appropriate) Section eas Electric Bear Fence Avalanche Probe Pole(s) Climbing Rope(s) (length) Maps Headlamp/Flashlight		
Make Model Number Color Landing Area (Drop Off) Landing Area (Pick Up) Commercial Air Taxi Yes No Name of Company	ENT (Check All That Ap Is marked with * are ref Fields marked with ** a torage Container(s)	vessel(s), sailboat(s), other: Type Number Make Model Length Horsepower State/Province Launch Location Take Out Location Trailer Parking Location Trailer Parking Location Sply & Indicate Quantity Where poply & Indicate Quantity Where State Prohibited in Wildemess Are Bear Spray Avalanche Shovel(s) Climbing Helmet(s) GPS Device(s) Whistle Snowshoes	Colors er ** Hull Registration # Launch Date Take Out Date Rental Yes No Appropriate) Section Pas Electric Bear Fence Avalanche Probe Pole(s) Climbing Rope(s) (length) Maps Headlamp/Flashlight Snowboard(s)		

Cellular Telephone(s) * (include type, service provider, phone # and quantity	Type(s))	Service Provid	er(s) & Phone #(s)
Satellite Telephone(s) * (include type, service provider, phone # and quantity	Type(s))	Service Provid	er(s) & Phone #(s)
Personal Locator Beacon(s) or Device(s) * (include type and service provider)	Type(s)	Service Provid	er(s) & Phone #(s)
Radio(s) *	Type(s)		
	Туре		Quantity
	U.S. Air Force type s	signal mirror	
Emergency signaling devices	Signal panel		
	Signal flare		
	Signal strobe		
	Other (list):		Quantity
Tent or Shelter (Including hammock)	Type(s)	Color(s)	Quantity
	Type(s)	Color(s)	Quantity
Bicycle or Mountain Bike**	.) [- (-)	(-)	
Snow Sled/Sledge	Type(s)	Color(s)	Quantity
Pack & Saddle Stock	Type(s)		Quantity
		Туре	Quantity
First Aid Kits		☐ Minor	
		🗌 Major	1
U.S. Coast Guard Approved Personal Flotation Devic	es		Quantity
Offshore Lifejacket - Type 1			
□ Near Shore Buoyant Vest - Type II			
Flotation Aid - Type III			
Throwable Device - Type IV (boat cushions, ring buc	ys, horseshoe buoys, thro	ow bags, and throw lines)	
Special Use Device - Type V (includes include work	vests, deck suits, and hyb	rids for restricted use	
Inflatable Life Jackets			
		Type(s)	Color(s)
Backpack		, , , ,	、,
		Type(s)	Size(s)
D Footwear		1 3 4 6 (3)	
Dog Team/Sled(s)		# of Sleds	# of Dogs

		ITINER	ARY DETAILS				
Start Date	End Date		Entry Location		Exit Loo	cation	
Night Da	te Campsite /Cam	p Location /Us	e Area/Trail or Ro	oute			
Night 1 Night 2 Night 3							
Night 4							
Night 5 Night 6							
Night 7							
Additional Choices: below:	If all choices above are una	available, the E	Backcountry Infor	mation Ce	enter will retry usi	ng options	selected
# of Campsites	Trip Length (# of nig	jhts)	Group Size	Ν	1inimum Group S	ize	
Flexible Itinerary?	Similar/Nearby C		Alternate [Dates	Earliest Start Da	te La	test Start Date
Yes No	Reverse Itinerary	/	to				
	PE	RMIT FEE PA		ATION			
Name on Card					Billinę	g Phone N	lumber
Billing Address		City		State/Pro	ovince Posta	al Code	Country
Method of Payment	Check Money	Order	MasterCard	Visa	Discover	Ameri	can Express
Fee Discounts: Golden Access	Interagency Access Pass Pass Golden Age Pass		icy Annual Senio	r Pass	Interagency Lif	etime Ser	nior Pass
Credit Card Numbe	-	Expiration D	Date	CVC Co		Amount A	uthorized
Signature					\$ Date		
2		MISCI	ELLANEOUS				
	Notice Regarding the Us	e of Cell Phor	nes, Satellite Ph	ones, and	d Personal Loca	tor Device	es
Special Notice **	Communication devices m to accept the risks inheren						responsibility
Remarks							
Special Instructions							
		SIG	NATURES				
Visitor's Signature		Date	Issuing Officer's	s Signatui	re	Date/Tim	ie

(PARK SPECIFIC FIELDS - TO BE USED ONLY BY THE SPECIFIED PARKS

CANYONLANDS NATIONAL PARK						
		River Trip II	nformation			
River Use Information						
Please do not use this form	n for land-based	trip reservations.				
Cataract Canyon Flat Water						
Number of People *	Number of People * Number of Vessels (Describe in Other Details)					
Park Entry Point			Take-out Information			
Mineral Bottom	Potash	Launch Date	Location	Date		
	i otash		Upriver Shuttle Company (if using	one):		
Other Details						

GREAT SMOKY MOUNTAINS NATIONAL PARK Appalachian Trail Thru-Hiker Backcountry Permit				
I certify that I am beginning and ending my trip more than 50 miles outside of park and hiking/camping only on the AT while in the park.				
AT Thru-Hiker Direction:	Northbound	Southbound		
19			(0) (0) (1)	

Estimated date you will begin your hike through

National Park.

(Specify Date)

Permit Number (issued by Park) Permit request ID (issued by Park) Please provide desert and/or Grand Canyon hiking experience.	<u>í</u>			GRAND CANYON NATIONAL PARK		
Daily Itinerary Details (use additional pages if necessary) Date Daily Mileage (very important) Camp Location / Use Area Night 1 Camp Location / Use Area Night 2 Night 2 Camp Location / Use Area Night 3 Night 3 Camp Location / Use Area Night 3 Night 4 Camp Location / Use Area Night 3 Night 5 Camp Location / Use Area Night 6 Night 6 Camp Location / Use Area Night 7 Night 7 Camp Location / Use Area Night 7 Night 6 Camp Location / Use Area Night 7 Date of most recent recreational Colorado River trip Extern Trip Leader Information (Permit Applicant) Password To be notified via email about the main lottery or any follow-up lotteries, you MUST CHOOSE TO OPT-IN by checking the corresponding boxes below. Annual Lotteries: I want to be notified by email about the main lottery (held in February). Yes No Cancellations: I want to hear about follow-up lotteries with launch dates in: (select all months you are interested in) November January April July October						
(use additional pages if necessary) Date Daily Mileage (very important) Camp Location / Use Area Night 1 Night 2 Night 3 Night 4 Night 5 Night 6 Night 7 Date of most recent recreational Colorado River trip User name Password To be notified via email about the main lottery or any follow-up lotteries, you MUST CHOOSE TO OPT-IN by checking the corresponding boxes below. Annual Lotteries: I want to be notified by email about the main lottery (held in February). Yes No Cancellations: I want to be notified by email about the main lottery (held in February). Yes No January April July October Yes May August November	Please pro	vide desert and	d/or Grand Canyon h	iking experience.		
(use additional pages if necessary) Date Daily Mileage (very important) Camp Location / Use Area Night 1 Night 2 Night 3 Night 4 Night 5 Night 6 Night 7 Date of most recent recreational Colorado River trip User name Password To be notified via email about the main lottery or any follow-up lotteries, you MUST CHOOSE TO OPT-IN by checking the corresponding boxes below. Annual Lotteries: I want to be notified by email about the main lottery (held in February). Yes No Cancellations: I want to be notified by email about the main lottery (held in February). Yes No January April July October Yes May August November	1					
Date Daily Mileage (very important) Camp Location / Use Area Night 1	9					
Night 1 Image: Carring Location / Ose Area Night 1 Image: Carring Location / Ose Area Night 2 Image: Carring Location / Ose Area Night 2 Image: Carring Location / Ose Area Night 3 Image: Carring Location / Ose Area Night 4 Image: Carring Location / Ose Area Night 5 Image: Carring Location / Ose Area Night 6 Image: Carring Location / Ose Area Night 7 Image: Corring Location / Ose Area Date of most recent recreational Colorado River trip User name Date of most recent recreational Colorado River trip User name Annual Lotteries: I want to be notified by email about the main lottery (held in February). Yes No Cancellations: I want to hear about follow-up lotteries with launch dates in: (select all months you are interested in) January April July Yes November			Daily Mileage			
Night 2 Image: Construct of the second s		Date		Camp Location / Use	Area	
Night 3 Image: Second seco	Night 1					
Night 4 Image: Construct of the second s	Night 2					
Night 5 Image: Second seco	Night 3					
Night 6 Image: Construction of the provided in theprovided in the provided in the provided in th	Night 4					
Night 7 River Trip Leader Information (Permit Applicant) Date of most recent recreational Colorado River trip User name Password To be notified via email about the main lottery or any follow-up lotteries, you MUST CHOOSE TO OPT-IN by checking the corresponding boxes below. Annual Lotteries: I want to be notified by email about the main lottery (held in February). Yes No Cancellations: I want to hear about follow-up lotteries with launch dates in: (select all months you are interested in) January April July October January April July October November	Night 5					
River Trip Leader Information (Permit Applicant) Date of most recent recreational Colorado River trip User name Password To be notified via email about the main lottery or any follow-up lotteries, you MUST CHOOSE TO OPT-IN by checking the corresponding boxes below. Annual Lotteries: I want to be notified by email about the main lottery (held in February). Yes No Cancellations: I want to hear about follow-up lotteries with launch dates in: (select all months you are interested in) January Hay April January April July October November	Night 6					
(Permit Applicant) Date of most recent recreational Colorado River trip User name Password To be notified via email about the main lottery or any follow-up lotteries, you MUST CHOOSE TO OPT-IN by checking the corresponding boxes below. Annual Lotteries: I want to be notified by email about the main lottery (held in February). Yes No Cancellations: I want to hear about follow-up lotteries with launch dates in: (select all months you are interested in) Yes January April July October February May August November	Night 7					
Colorado River trip User name Password To be notified via email about the main lottery or any follow-up lotteries, you MUST CHOOSE TO OPT-IN by checking the corresponding boxes below. Annual Lotteries: I want to be notified by email about the main lottery (held in February). Yes No Cancellations: I want to hear about follow-up lotteries with launch dates in: (select all months you are interested in) January April July February May August						
Colorado River trip Yes To be notified via email about the main lottery or any follow-up lotteries, you MUST CHOOSE TO OPT-IN by checking the corresponding boxes below. Annual Lotteries: I want to be notified by email about the main lottery (held in February). Yes Cancellations: I want to hear about follow-up lotteries with launch dates in: (select all months you are interested in) No January April July October February May August November	Date			User name		Password
Annual Lotteries: I want to be notified by email about the main lottery (held in February). Yes No Cancellations: I want to hear about follow-up lotteries with launch dates in: (select all months you are interested in) January April July October February May August November		Colorado Riv	er trip			
Annual Lotteries: I want to be notified by email about the main lottery (held in February). Yes No Cancellations: I want to hear about follow-up lotteries with launch dates in: (select all months you are interested in) January April July October February May August November	-		3			
Annual Lotteries: I want to be notified by email about the main lottery (held in February). No Cancellations: I want to hear about follow-up lotteries with launch dates in: (select all months you are interested in) January January April July February May August	To be notif	ied via email a	bout the main lottery	or any follow-up lotteries, you MUST CHOOSE TO OPT-IN by	y checking the	corresponding boxes below.
JanuaryAprilJulyOctoberFebruaryMayAugustNovember	Annual Lot	teries: I want t	to be notified by ema	il about the main lottery (held in February).		
February May August November	Cancellatio	ons: I want to h	ear about follow-up l	otteries with launch dates in: (select all months you are interes	sted in)	
	January April July October				ober	
March June September December	Februa	iry	May	August Nov	rember	
	March		June	September Dec	ember	

	Grand Canyon National Park continued - River Trip Lottery Information										
Date of most ree	cent recreati	onal Colora	do river								
trip: Select up tr	five launch	date choice	os from								
available list					For your launch	date choices, list	t user na	mes of potent	ial alternate	e trip lea	aders:
	Enter launch				List user names						
		Date			Potential Alternate Trip Leader						
1 st Choice	-										
2 nd Choice											
3 rd Choice	0										
4 th Choice											
5 th Choice											
			(Qual	lified Boat Operat	tor Information	n				L
Last Name					First Name					МІ	Suffix
Street Address											
City						Ĩ	State	Zip C	ode		Country
											,
Da	te of Birth				Day Phone			E	vening Pho	one	-
Email Address						l					
Linuirradioes											
Qualified boat-o	perator river	experience	9								
				R	iver Trip Participan	tInformation					
					rmation required for)				
Last Name					st Name				МІ		Suffix
Street Address											
City						State	Zip Co	ode	Country		
Date of Birth		Da	ay Phone			Evening Phone)				
Email Address		1			1						
Date and location	n where ner	+icipant will	Liain the river tri		Date and location	whore participan	دما النبيد •	va tha rivar tri	-		
	n where par	псран ми		p		Mere participart	[WIII IEa)		
					River Trip Info	mation					
Date this trip pa Ranch	sses Phanto		ate this trip pass amond Creek	es or	r takes out at	No. of participa	ints laun	ching from Le	es Ferry		
Ranon											
Number of participants joining the trip Number of participants leaving the trip											
after Lees Ferry			reek		after Lees Ferry bu						
Number of parti	cipante ioinir	a the trip a	t Diamond Cree		Number of particip	ants leaving the	trip at D	iamond Creek			
	opants joini			71		ants leaving the	trip at D				
Number of child	ren ane		of adults (age 16								
15 and younger	on the trip		covered under		Pass Serial Numbe	er(s)	F	River Trip Take	eout Date		
this pass											

River Trip Takeout Location	River Trip Type				
Diamond Creek Dearce Ferry South Cove	Motor Non-motor Non motor with motor support(hybrid)				
By checking this box you agree to attend the L	ees Ferry orientation program.				
By checking this box you acknowledge that yo penalties.	u read and understood the Grand Canyon National Park noncommercial river trip notice of				
	the Grand Canyon National Park noncommercial use affidavit and certify that all of the your party is true and complete to the best of your knowledge.				
Family Membe	r Potential Alternate Trip Leader Information				
Is the proposed PATL an immediate family member? (legal and siblings) Yes $\hfill No$	Is the proposed PATL an immediate family member? (legal spouses, children, parents, and siblings as well as legal spouses of these children, parents, and siblings) Yes No				
Will the proposed PATL be 18 or older on the launch date?	Yes No				
Did the proposed PATL apply in the same lottery? (as eithe	r a trip leader or a confirmed PATL) Yes 🔲 No 🔲				
Is the proposed PATL already on a recreational river trip the	e same year as this launch date? Yes 🔲 No 🗌				
Would adding this proposed PATL cause lottery application	points to decrease? Yes 🔲 No 🔲				
Proposed PATL last recreational river trip date:					
Proposed PATL last won river trip date:					
Proposed PATL Legal Name:					
Proposed PATL User Name (from their river profile):					
YEL	LOWSTONE NATIONAL PARK				

TELLOWSTONE NATIONAL PARK				
APPLICANT INFORMATION				
(Backcountry Permit Application)				
Additional Party Members Names:				
METHOD OF TRAVEL (Check All That Apply)				
I will use the Yellowstone Lake boat shuttle: Yes 🗌 No 🗌				
I am camping at a Yellowstone Lake Dock Site: On my boat? Yes 🗌 No 🗌 On shore? Yes 🗌 No 🗍				

YOSEMITE NATIONAL PARK					
First Nights Camp Location.					
Own Canister					
Bear Lockers (HSC/LYV Only)					
Rented Canister (Include caniste	er numb	vers)			
Make/Model of Bear Canister(s).					
	Half Dome				
I would like to hike to the top of Half Dome while on this overnight wilderness trip. Please reserve Half Dome Permits for an additional \$10.00 per person, payable when I pick up my wilderness permit. (Check) I Yes No					
If Half Dome permits are NOT available for my trip (check):		Please do NOT process this reservation Make this wilderness permit reservation without Half Dome permits. I understand the for wilderness permit reservations	hat there are no refunds		

	Half Dom	e Lottery			
Group Leade	er Information	Alternate Group L	eader Information		
Group Leader	Date of Birth	Date of Birth Group Leader			
	Applyi	ng For			
Facility					
Preferre	d Choice	Alternative	Choice 1		
Permit Entry Date	Permit Group Size	Permit Entry Date	Permit Group Size		
		ue Pass			
I would like to exit over Donohue Pas	s on this overnight wilderness trip.	Yes No			
If the Donohue Pass Exit quota is NOT available for my trip (check):No Please do NOT process this reservationMake this wilderness permit reservation without the Donohue Pass Exit. I understand that there refunds for wilderness permit reservations					
Will the trail you are traveling on exit	Yosemite National Park and enter a dif	fferent wilderness area? Yes	No		
Please specify which mountain pass	you plan to hike over when exiting Yos	emite.			
I have read and agree to the Yos I have read the terms and conditi	emite Camping rules and regulations. ions.				
	Winter Self-	Registration			
Equipment Carried (Example: stove,	sleeping bag, bivy sack, shovel, skins). List all gear items (to include make/n	nodel/color):		
Trip leader's signature			Date		

Privacy Act Statement

General: This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974), December 21, 1984, for individuals completing this form.

Authority: 54 U.S.C. §100101, NPS Organic Act; 16 U.S.C. 1 131-1136, Wilderness Act; 43 U.S.C. §1701 et seq.,16 U.S.C. §6801-6814, the Federal Lands Recreation Enhancement Act; 36 CFR Part 71, Recreation Fees; 36 CFR 1.6, Permits; and 36 CFR 2.23 Recreation Fees.

Purpose and Uses: To establish and verify an applicant's eligibility for a permit to conduct certain activities within the National Park System and to process permits for individual members of the public and organizations interested in obtaining a permit authorizing an activity. Information collected will be used to provide the public and permittees with permit-related information, to monitor activities conducted under a permit, to analyze data and produce reports to monitor the use park resources, to assess the impact of permitted activities on the conservation and management of protected species and their habitats, and to evaluate the effectiveness of the permit programs. The DOI and NPS may use the information to meet reporting requirements, to generate budget estimates and track performance, and to assist park staff with visitor education, fee collection, resource management and protection, recreational use planning, law enforcement and public safety personnel for such purposes as emergency contact and search and rescue efforts; to provide permit holders and participants with information about parks and their partners; and to provide reports of activities conducted under an issued permit.

Based on the disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, the National Park Service may share information with first responders and Federal, state, and local governments to provide information needed to locate an individual or render aid in an emergency; to recover debts owed to the United States; to respond to a violation or potential violation of the law; in response to a court order and/or discovery purposes related to litigation; or other authorized routine use when the disclosure is compatible with the purpose for which the records were compiled.

Effects of Nondisclosure: It is in your best interest to answer all of the questions. The U.S. Criminal Code, Title 18 U.S.C. 1001, provides that knowingly falsifying or concealing a material fact is a felony that may result in fines of up to \$10,000 or 5 years in prison, or both. Deliberately and materially making false or fraudulent statements on this form will be grounds for not granting you a Backcountry/Wilderness Use Permit.

Paperwork Reduction Act Statement

We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) and 36 CFR 1-7, 12 and 13 which authorize the National Park Service to require applicants to fill out this form to monitor resources and to protect visitors. This information is being collected to allow the park management to make value judgements necessary to enhance the safety and enjoyment of both the visitors and wildlife. All applicable parts of the form must be completed in order for your request to be considered. You are not required to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

Estimated Burden Statement

Public Reporting burden for this form is estimated to average 8 minutes per response, including the time it takes for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Comments regarding this burden estimate or any aspect of this form should be sent to the Information Collection Clearance Officer, National Park Service, 13461 Sunrise V alley Drive (MS-244) Reston, V A 20192. Do not send your completed form to this address. Please send to the Park address on teh first page.