

NORTHERN BACKCOUNTRY EXCURSION OVERNIGHT TRIP RESERVATION REQUEST FORM

For Nááts' įhch'oh National Park Reserve and Nahanni National Park Reserve

Type or print clearly with ink. Return completed request to:

P.O. Box 348 Fort Simpson, NT, Canada, X0E 0N0

Telephone: 867-695-7750 Fax: (867) 695-2446 Email: pc.nahanniinfo-infonahanni.pc@canada.ca

GROUP DESIGNATION (Check one that applies)						
☐ Non- Guided ☐ Black Feather ☐ Nahanni River Adventures ☐ Nahanni Wilderness Adventures						
Canoe North Adventures (Natla River only) Summit Helicopters (Nááts' įhch'oh Cultural Tour) Solitude Excursions (Nahanni NPR)						
	TRIP LEADER					
Surname:			First Name:			
Address:		City:		Province:	Country:	
7 (33) 330						
Postal Code:	Telephone:		Email:		Group Size:	
	TRIP LOCAT	TON, TYPE, & DA	TES (Check /c	complete all that appl	y)	
Trip will include: Nááts'įľ					,	
Activities include: paddling	climbing] heli-hiking _ cul	tural tour 🗌 b	ackpacking oth	ner	
Start Location:	Start Location: Start Date:			End Location: End Date:		
Start Location.	Glart Bale.		Life Location	•	End Bate.	
Aircraft Charter Company (entering park): Aircraft Charter Company (departing park): Aircraft Charter Company (departing park):					ı arting park):	
7 7 31 7						
PREFERRED DATES FOR CAMPING AREAS WITH LIMITED CAPACITY (Complete all that apply)						
Glacier Lake:			Fairy Meadows / Cirque of Unclimbables:			
Nájlicho preference:	Nájljcho alternate	:	Gahnįhthah Mį	e preference:	Gahnįhthah Mje alternate:	
FOR INTERNAL USE ONLY						
Date Received:	Payment Auth	orization Number:	Reservation			
Date Hecolved.	ayırıcın Adın	onzadon Numbel.	i iosci valiOH	TNUTTIOGE.		







ADDITIONAL GROUP MEMBERS

Park Licenced Guide Group Member (check one)			Park Licenced Guide Group Member (check one)				
Surname:	First Name:		Surname:		First Name:		
Address:	City:		Address:		City:		
Province:	Postal Code:	Postal Code:			Postal Code:		
Country:	Telephone:		Country: Telephone:		none:		
Email Address:			Email Address:				
May we contact you for future visitor surveys? ☐ Yes ☐ No			May we contact you for future visitor surveys? Yes No				
☐ Group Member			Group Member	☐ Group Member			
Surname:	First Name:		Surname:		First Name:		
Address:	City:	City:			City:		
Province:	Postal Code:		Province:		Postal Code:		
Country:	elephone:	ephone:		Teler	phone:		
Email Address:			Email Address:				
May we contact you for future visitor surveys? Yes No			May we contact you for future visitor surveys? ☐ Yes ☐ No				
Group Member			☐ Group Member				
Surname: First Name:		Surname:		First Name:			
Address:	City:		Address:		City:		
Province:	Postal Code:		Province:		Postal Code:		
Country:	Telephone:		Country: Tele		phone:		
Email Address:			Email Address:				
May we contact you for future visitor surveys? Yes No			May we contact you for future visitor surveys? ☐ Yes ☐ No				
FOR INTERNAL USE ONLY RESER	RVATION NUMBER:						







ADDITIONAL GROUP MEMBERS

Group Member		☐ Group Member					
Surname:	name: First Name:		Surname:		First Name:		
Address: City:			Address:		City:		
Province: Postal Code:			Province:		Postal Code:		
Country:	ry: Telephone:		Country: Telephone:				
Email Address:			Email Address:				
May we contact you for future visitor surveys? ☐ Yes ☐ No		_	May we contact you for future visitor surveys? Yes No				
Group Member			Group Member				
Surname:	First Name:		Surname:		First Name:		
Address:	Address: City:		Address:		City:		
Province:	ce: Postal Code:		Province:		Postal Code:		
Country:	intry: Telephone:		Country:	Tele	ohone:		
Email Address:			Email Address:				
May we contact you for future visitor surveys? Yes No		□No	May we contact you for future visitor surveys? Yes No				
Group Member			Group Member				
Surname:	First Name:		Surname:		First Name:		
Address:	S: City:		Address:		City:		
Province:	Postal Code:		Province:		Postal Code:		
Country:	intry: Telephone:		Country:	Telephone:			
Email Address:			Email Address:				
May we contact you for future visitor surveys? ☐ Yes ☐ No		□No	May we contact you for future visitor surveys? ☐ Yes ☐ No				
Group Member			Group Member				
Surname:			Surname:		First Name:		
Address:	Idress: City:		Address:		City:		
Province:	Province: Postal Code:		Province:		Postal Code:		
Country:	Country: Telephone:		Country: Telephone:				
Email Address:			Email Address:				
May we contact you for futur	re visitor surveys? Yes [□No	May we contact you for future visitor surveys? ☐ Yes ☐ No				
FOR INTERNAL USE ONLY RE	SERVATION NUMBER:						







EMERGENCY CONTACT INFORMATION

PR	IMARY EMERGENCY CONTA	ACT (MANDATORY)
Surname:	First N	lame:
Address:	·	City:
Province:	Country:	Postal Code:
Tel:	Email:	,
	SECONDARY EMERGENO	CY CONTACT
Surname:	First N	lame:
Address:	·	City:
Province:	Country:	Postal Code:
Tel:	Email:	

IMPORTANT:

- Please list an emergency contact who is able to speak English and/or French
- Primary and Secondary Emergency contact persons require:
 - o The completed copy of this Reservation Request Form
 - o Contact information for the next of kin for all group members
 - o Confirmation of Registration from the trip leader
 - Confirmation of De-registration from the trip leader
 - The Nahanni National Park Reserve 24 hour Emergency Duty Officer Telephone Number: **867-695-3732** (June 1 September 30)
 - The Nahanni National Park Reserve Office Telephone Number for general enquiries: 867-695-7750
 (7 days a week June 15 August 31); (Monday through Friday September 1 June 15)

FOR INTERNAL USE ONLY RESERVATION NUMBER:







GROUP EQUIPMENT

Item Description	ir). Colour	Quantity	Make	Model
·				
OMMUNICATION EQUIP	MENT Check the	e box and fill out fu	rther information if yo	ou are using an
e following:				
□ Satellite Phone				
Brand				
Brand				
Brand				
BrandPhone number	cation Device (SE			
BrandPhone number □ Satellite Emergency Notifice Brand:	cation Device (SE	ND)		
BrandPhone number Satellite Emergency Notifice Brand:Phone number:	cation Device (SE	ND)		
BrandPhone number □ Satellite Emergency Notifice Brand:	cation Device (SE	ND)	e? □Yes [□No
BrandPhone number Satellite Emergency Notifice Brand: Phone number: Do you have an assigned of	cation Device (SE	ND) d with this device		
BrandPhone number Satellite Emergency Notifice Brand:Phone number:	cation Device (SE	ND) d with this device		
BrandPhone number Satellite Emergency Notifice Brand: Phone number: Do you have an assigned of the state of the	cation Device (SE	ND) d with this device act Name		
BrandPhone number Satellite Emergency Notifice Brand: Phone number: Do you have an assigned of	cation Device (SE	ND) d with this device act Name		







TRIP ITINERARY

MAIN LOCATIONS (Check ALL that apply)
South Nahanni River Little Nahanni River Broken Skull River Flat Fiver Natla River (O'Grady Lake) Other waterways (detail below)
☐ Cirque of Unclimbables Climbing ☐ Vampire Peaks Climbing ☐ Highest Peak Climbing ☐ Other Climbing (detail below)
☐ Hole-In-Wall Backpacking ☐ Ram Plateau Backpacking ☐ Fairy Meadows Backpacking ☐ Brokenheart Plateau Backpacking ☐ Other Backpacking (detail below)
DETAILED TRIP ITINERARY Please provide a day by day itinerary of the planned travel route and
known camping locations.
FOR INTERNAL USE ONLY RESERVATION NUMBER:







INSTRUCTIONS

RESERVATION, REGISTRATION, AND DEREGISTRATION

Parks Canada uses the information provided in this form for the purpose of visitor safety and park management. Details for Privacy Act Bank Number PC PPU 067 backcountry use permits and Bank Number PC PPU 069 high risk activities are found here: http://www.pc.gc.ca/en/agence-agency/dp-pd/infosource#pa-1-4-1

Overnight **trip reservation** is mandatory for both Nahanni and Nááts'jhch'oh National Park Reserves. Confirmation of your reservation is issued after you provide payment and your reservation request is processed. Please fill all sections of this Reservation Request Form. Incomplete forms delay confirmation of your reservation.

Overnight trip registration and trip de-registration is also mandatory. The trip leader must contact the Nahanni office on the day entering either park reserve. This registers the start of the trip. The trip leader must contact the Nahanni office on the stated trip end date. This de-registers the trip. Registration and de-registration is done in person, by email, or by telephone. Use the main office number to register and de-register your trip. Leave a message after business hours. The Duty Officer telephone is for emergencies only.

Trip reservation, registration and de-registration is mandatory for visitor safety.

SCHEDULING YOUR TRIP

Reservations are confirmed on a first come first served basis. The Nahanni NPR team is ready to assist you with trip planning and scheduling.

Camping areas at popular destinations fill quickly. The peak season is July 15 - August 15. Camping space is limited at:

- Nájlicho (Virginia Falls)
- Gahnihthah Mie (Rabbitkettle Lake)
- Glacier Lake
- Fairy Meadows in the Cirque of Unclimbables

Náįlįcho and Gahnįhthah Mįe camping is restricted to two nights maximum. Please provide your preferred camping dates and alternate camping dates. The Nahanni NPR team aims to reserve one or the other for you.

Weather and many other factors impact trip schedules. Campsite crowding sometimes occurs for this reason. Please be patient and understanding.

We recommend you plan for unexpected delays. Do your best to stay on schedule with your trip itinerary. We know that is not always possible.

Inform the Nahanni park office of all schedule changes. Prior to your departure is best. Park employees are stationed at Nájlicho and Gahnjhthah Mie when possible. They are happy to assist if your schedule changes mid-trip.

PAYMENT OPTIONS & REFUND POLICY

The Northern Backcountry Excursion Fee is \$147.20. Please pay by cheque, Visa, MasterCard or American Express. Do not mail cash. Call our Visitor Reception at 1-867-695-7750 to pay by credit card. Sign your cheque or money order to the Receiver General for Canada. Mail to:

Nahanni National Park Reserve P.O. Box 348 Fort Simpson, NT, Canada, X0E 0N0

Reservations are refundable until March 31.

GROUP DESIGNATION

Custodial Groups are affiliated with an institution. At least one person is below the age of majority. The minor is not in the company of his/her parent or legal guardian. These groups include and are not limited to school groups, Scout/Guide groups, church groups, cadet groups and community youth groups.

All custodial groups must travel with a park licensed outfitter or guide. A custodial trip application form is required. Parent or legal guardian permission is required.

Non-Guided Groups have equal trip participation by all members. This includes the trip leader. It is prohibited for any member to receive monetary compensation or donations-in-kind for trip participation. Maximum group size: 12 group members, including the trip leader. Larger group size requests are reviewed on a case by case basis. Approval for larger group size is unlikely during peak season.

Guided Groups are in the care of a commercial outfitter or guide. Commercial outfitters and guides must be licenced to operate in the park reserve(s). Maximum group size: 12 guests and 3 guides including trip leader. Larger group size requests are reviewed on a case by case basis. Approval for larger group size is unlikely during peak season.



