



2011 GUEST INFORMATION SHEET

TRIP DATES: _____

NUMBER IN GROUP: 1 2 3 4 5 6 7 8 9 10 11 12 13 14

GROUP HEAD: _____

GUEST NAME: _____ Mr./ Dr./ Mrs./ Ms./ Miss/
(Full legal name required)

Thank you for booking with Escott Sportfishing Inc. this 2011 Fishing Season! To assist us in preparation for your upcoming fishing adventure; please take a moment to complete the following guest information sheet and return by email to info@escottsportfishing.com or mail to 2612 Bayview Street, Crescent Beach, BC, Canada, V4A 2Z4.

This information is used for us to personalize your trip, therefore be sure to note any special requests we can accommodate to make your trip an experience of a lifetime, next... get ready for some... **BIG BITES !**

Thank you for your prompt reply.

FULL LEGAL NAME: _____

STREET ADDRESS: _____

CITY: _____ PROV/STATE: _____

POST/ZIPCODE: _____ HOME PHONE: _____

BUSINESS PHONE: _____ MOBILE: _____

EMAIL: _____

BUSINESS NAME, (if applicable) _____

FOOD ALLERGIES: YES _____ NO _____

FOOD ALLERGIES: _____

GENERAL ALLERGIES: _____

EMERGENCY CONTACT NAME: _____

E-MAIL: _____ **HOME PHONE:** _____

BUSINESS PHONE: _____ **MOBILE:** _____

MEDICAL REQUIREMENTS: _____

MEDICATION(S) : _____

DIETARY REQUIREMENTS: _____

DO YOU REQUIRE A FISHING LICENSE? YES _____ NO _____
BIRTH DATE (FOR FISHING LICENSE) _____ (DAY/MONTH/YEAR)

SPECIAL REQUESTS/COMMENTS: _____

Please contact us at cell 1.604.818.5106 or info@escottsportfishing.com if you may have any questions or visit our web-page at www.escottsportfishing.com – Thank you!

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