

Ancient Pathways Traditional Skills Semester Application

(Please Print)

Name: _____

Address: _____

State: _____ Zip Code: _____ Country: _____

Phone: _____ Email: _____

Date of Birth: _____ Male/Female (circle)

Occupation: _____

Semester dates to which you are applying (winter or fall and year):

If student, what university, year and major:

In order to give us a better idea of how to meet your expectations for the semester, please take a few minutes to write a short essay describing what you expect to gain from spending time in the semester program. Include specific goals or objectives you would like to accomplish. Please type and attach to this form.

How did you hear about us?

Signature: _____

Date: _____

Upon acceptance into the program, you will be sent a medical form, waiver, syllabus, gear list, directions, and other pertinent course information.

Mail application to:
Ancient Pathways, LLC
Tony Nester, Head Instructor
PO Box 2068
Flagstaff, AZ 86003-2068 USA

If you have any questions, contact Tony Nester at 928-526-2552 or info@apathways.com.