



BACKCOUNTRY/WILDERNESS USE PERMIT APPLICATION

Grand Canyon National Park
Backcountry Information Center
1824 S Thompson St, Suite 201
Flagstaff, AZ 86001
Telephone (928) 638-7875, FAX (928) 638-2125



APPLICANT INFORMATION					
Last Name Griffiths		First Name Heike		MI RU	Suffix Mrs
Street Address 16, Station Road					
City Kidwelly		State Dyfed	Zip Code SA174UH	Country United Kingdom	
Email Address heikewales@googlemail.com		Contact Phone +447415136459		Contact Phone +441554892790	
Is this an organized or guided trip? ☐ Yes ☒ No Group Name					
TYPE OF BACKCOUNTRY USE REQUESTED (Check All That Apply)					
☒ Backpacking ☐ Stock Number of Stock:					
☐ Canyoneering/Rappelling ☐ River Use Indicate Type and/or Location of Use:					
ITINERARY DETAILS (for more choices, submit additional pages)					
CHOICE ONE			CHOICE TWO		
Group Size 2	Entry Location Yaki Point, South Ri	Exit Location Grand Canyon Villa	Group Size	Entry Location	Exit Location
DAILY ITINERARY DETAILS (use additional pages if necessary)			DAILY ITINERARY DETAILS (use additional pages if necessary)		
Date		Trail / Route to be Taken / Camp Location / Use Area	Date		Trail / Route to be Taken / Camp Location / Use Area
Night 1 05/25/2019		Bright Angel Camp CBG	Night 1		
Night 2 05/26/2019		Indian Garden Camp CIG	Night 2		
Night 3			Night 3		
Night 4			Night 4		
Night 5			Night 5		
Night 6			Night 6		
Night 7			Night 7		
Additional Choices: If all choices above are unavailable, the Backcountry Information Center will retry using options selected below:					
Alternate Start Dates 05/26/2019 to 05/27/2019		Trip Length (# of nights) 2	Minimum Group Size 2		
☐ Similar/Nearby Campsites		☒ Reverse Itinerary	Flexible Itinerary? ☐ Yes ☒ No		
MODE OF TRANSPORTATION (for trailhead vehicles only, leave blank if unknown)					
Vehicle (Including 4WD/Motorcycle): Rental? ☒ Yes ☐ No		Parking Location Grand Canyon Village	Plate # not known, yet	State Nevada	
METHOD OF PAYMENT					
Method of Payment ☒ MasterCard ☐ Visa ☐ Discover ☐ American Express				☐ Use hiker credit on file	
Name on Card Heike R				Total Amount Authorized \$ 26	
Credit Card Number 5253030009994732				Expiration Date 06/19	
Signature H. Griffiths				Date 12/20/2018	