



Continental Divide Trail Coalition CDNST Completion Certificate Form

The Continental Divide Trail Coalition (CDTC) recognizes anyone who reports completion of the entire Continental Divide National Scenic Trail. CDTC policy is to operate on the honor system, assuming that those who submit a request for recognition, have completed a journey between the Mexican and Canadian Border along the Continental Divide. Issues of sequence, direction, speed, length of time or substitutes for the official route are not considered. CDTC assumes that those who apply have made an honest effort to complete the entire Trail, even if they did not pass by every reassurance marker or blaze. If you meet these standards, please complete and sign the form below.

I, _____, verify that I have completed the entire length of the Continental Divide Trail.

(note: please print name legibly so we can provide the correct spelling of your name on your certificate.)

X _____
(signature) (date)

Trail name:(nickname) _____ Year Completed _____ Age _____

Street: _____ Race/Heritage _____

City, street, zip: _____ Male _____ Female _____

Country: _____ CDTC Member _____

Email: _____

Phone: _____

Type of Hike:

section hike thru hike Northbound Southbound continuous flip/flop

Starting date: _____ Finishing date: _____

Please circle how you would like your certificate to read:

Mexico to Canada

Canada to Mexico

Completions reported prior to December 31 may be listed in a future edition of CDTC's newsletter, and on CDTC's website. If you do NOT want to be included in this listing check here:



CDTC s often looking for contributors and resources to provide information to future users of the CDT. Would you be willing to be on our referral list? Yes No

Please Check any of the following that you would be willing to discuss:

- | | |
|---|--|
| <input type="checkbox"/> Hiked with dog | <input type="checkbox"/> Vegetarian or special diet |
| <input type="checkbox"/> used pack stock | <input type="checkbox"/> Dehydrated your own food |
| <input type="checkbox"/> Spent less than \$5,000 | <input type="checkbox"/> Hiked with ultra light pack |
| <input type="checkbox"/> Hiked with disability or medical condition | |

Do you have a presentation about your journey you would like to give? Yes No

We'd love to hear some of your stories. Please use the space below(or attach additional pages) to describe a few highlights or unique highlights of you experience, or feedback /suggestions for CDTC .

May we quote your hike summary at some point in the future? Yes No

With assistance form volunteers, CDTC will send your certificate of completion and CDT Patch within 12 weeks of receipt of your application. Please return completed form and \$5.00 to:

Continental Divide Trail Coalition
Completion Request
P.O. Box 552
Pine, CO 80470
