











The "Wheel to the Sea" is a *FREE* exciting community event is especially designed to serve individuals in wheelchairs, *including Iraq, Afghanistan and other military Veterans (and their families)*. Non-wheelchair users with minor Traumatic Brain Injury, PTSD, blindness, deafness or debilitating illnesses are also welcome to push a wheelchair or join in the event. Fueled with a hearty breakfast, we embark on this five mile naturalist lead hike through Point Mugu State Park. The trail includes rocky terrain, slopes and mud or stream crossings in times of wet weather. These natural obstacles provide challenges and opportunities for team-work and trust building. The event culminates at the beach with a family style barbeque and use of specialized beach wheelchairs. All who participate will benefit from the physical challenge, social interaction and camaraderie offered from this unique outdoor adventure!

Transportation to and from the event will be provided from locations in Woodland Hills and Newbury Park.

Saturday, May 2, 2015

8 AM to 6:30 PM

Santa Monica Mountains NRA (Rancho Sierra Vista to Sycamore Cove) Malibu, California (within Point Mugu State Park) The Wilderness Institute, Inc Partners:

Celebrating 30+ Years Since 1984 California State Parks
Kiwanis: Thousand Oaks,
Northridge, Canoga Park,
Chatsworth

Volunteer Mountain Bike Unit Mtns. Rec. Conservation Authority

Sponsored by: Natural Path Network

Pre-Registration is required by April 25, 2015 (Attendance limited)

Call 818-483-6570 or email your RSVP request to: Ciana@WildernessInstitute.com

You can Register on-line at: www.meetup.com/Wilderness-Adventures

Please fill out the registration AND the release forms and bring the completed forms with you to the event.

□ Disabled □ Volunteer □ Yes, I would like to support this event with a donation to The Wilderness Institute. Participant □ Are you also a Veteran? Check attached.		
Name(s):		Age(s):
E-mail: Address:		
City:	State:	Zip Code:
Phone (day):	Phone (eve):	
IN CASE OF EMERGENCY, CONTACT: Name:		
Phone (day):	Phone (eve):	
HEALTH INFORMATION (Participants Only): Participant's name:		
Local Physician's Name:		Phone:
Insurance Company Policy Number:		
Allergies (insect, stings, drugs, etc.):		
Condition Requiring Medication (epilepsy, diabetes, etc.):		
Recent Injuries, Illnesses or Operations:		
Other Physical Disabilities or Chronic Conditions:		
Wheelchair Type: ☐ Standard ☐ Sports	☐ Electric ☐ 3 Wheeler	□ Other
Any special considerations?		-

NOTE: Confirmation and directions will be **emailed or mailed** to you upon registration. **818-483-6570 www.WildernessInstitute.com**

"Push Your Limits ... Experience the Adventure!"