

Ice Age Trail Thousand-Miler Application



The Ice Age Park and Trail Foundation (IAPTF) recognizes anyone who reports completion of the entire Ice Age Trail and can have their accomplishment verified as a Thousand-Miler. IAPTF policy is to operate largely on the honor system, assuming that those who apply for the Thousand-Miler status have hiked all 1,000+ miles of the Ice Age Trail between Potawatomi State Park and Interstate State Park. Hiking all segments of connecting roads is necessary to qualify. Issues of sequence, direction, speed, length of time, or whether one carries a pack or not are not considered. Please respect these standards! It is essential to the continuation of the IAPTF's practice of recognizing the true achievements of Thousand-Milers. IAPTF does not share contact information with other groups or businesses. If you answer "Yes" to our referral list question (see below), we may share Thousand-Miler information with academic researchers and other Thousand-Milers.

Last name: _____ First name & initial: _____

Trail name (nickname): _____

Street address & apt #: _____

City: _____ State: _____ Zip code: _____ Country: _____

Home Phone: (_____) _____

Email: _____

Male / Female (*circle one*) Age the day you completed your hike: _____

Occupation: _____

IAPTF member: [Yes / No] Chapter affiliation: _____

Thru-Hike (entire Ice Age Trail in one continuous hike): [Yes / No] Eastbound / Westbound (*circle one*)

or Section-Hike (non-continuous): [Yes / No]

(over how many years, &/or months): _____

Starting date and location: (M, D, Y) _____

Finishing date and location: (M, D, Y) _____

Hiked solo: [Yes / No] Approximate % hiked solo: _____

Hiking partner or group: _____

Other hikers met on the Trail (particularly section- or thru-hikers): _____

Please describe a few highlights or unique aspects of your hike. Include the names and addresses (or phone numbers) of some of the people with whom you had interactions along the way. A brief itinerary of section hikes is requested. (*Please attach additional pages as necessary*).

May IAPTF put you on our "Ice Age Trail Thousand-Miler" referral list for prospective hikers? [Yes / No]
If "YES", do you expect to be at the address listed on page one for at least a year? [Yes / No].
If "NO" to remaining at your address, please forward your change of address to IAPTF when you move.

Do you have a slide show presentation that you would be willing to share with groups?
[Yes/ No]

Do you have other material you would be willing to share about your hike? [Yes/ No]

If "Yes", please describe: _____

Do you plan to attend the IAPTF Spring Annual Conference?: [Yes / No]

I, _____, verify that all of the above information is accurate and correct.
(Print your name)

(Signature) (Date)

After verifying your application, IAPTF will send you a certificate of completion and Thousand-Miler patch, and note your accomplishment in *Mammoth Tales*.

Please return form to: Ice Age Park & Trail Foundation
306 E. Wilson St., Lower Level
Madison, WI 53703

Do not write below this line -- For office use only.

Received: _____ Reviewed by: _____ Read: _____
Entered in database: _____ Certificate & Patch Sent: _____
Published in *Mammoth Tales*: _____