



# BIG BEAR WEEKEND GETAWAY

Open to MCRD Single Service  
Members & Geo-Bachelors

Price Includes: Lodging (Cabin),  
2 Breakfasts, Lift ticket,  
Ski/Snowboard Equipment and  
Transportation (No POVs)

# \$735

**non-refundable!**

***Trip Waiver & Full Payment Due NLT Thursday, 5 February at  
the Active Duty Center "Home of the SMP"***

**20**

**SPOTS AVAILABLE**

**DATE**

**Sat, 14 Feb 0900 –  
Mon, 16 Feb 1600**

**For more info: Contact the SMP Office at (619) 813-6704**

Authorized patrons of all abilities welcomed. Please contact SMP staff if reasonable accommodations are necessary.

**0900 Saturday, 14 February 2026 - 1600 Monday, 16 February 2026**

**Single Marine Program**

**SMP BIG BEAR WEEKEND TRIP**

Required Information	Please Print Clearly	Scanned or Emailed Waivers Are Not Accepted
Participant's Name: (Last, First)	Rate/Rank:	Male or Female:
Battalion:	Section:	Work Phone Number:
Cell Phone Number:		
Email: (Work or Personal) *Reminder will be sent to this email*		Date of Birth:

**MARITAL STATUS INFORMATION:**

**\*Only MCRD San Diego Single Service Members & Geo-Bachelors can participate in SMP Trips.\***

**CIRCLE ONE:** Single Geographical Bachelor (Spouse lives 100 miles or more away)

**SMP Trip Info**

1. Which activity will you be doing? **Circle One:** Skiing Snowboarding  
2. Are you willing to be a driver for the SMP 15-passenger van (to/from the trip)? **Circle One:** YES NO

**FOOD**

Do you have any dietary restrictions? **Circle One:** YES NO If yes, please explain: \_\_\_\_\_

**MEDICAL INFORMATION:**

1. Does the participant have any medical conditions that we should be aware of?  
(for example; diabetic or suffer from seizures.)

**Circle One:** YES NO If yes, please explain: \_\_\_\_\_

2. Are you currently taking any medication?

**Circle One:** YES NO If yes, please list all medications: \_\_\_\_\_

3. Do you have any allergies?

**Circle One:** YES NO If yes, please explain: \_\_\_\_\_

**Code of Conduct**

I must be a MCRD San Diego Single Service Member or Geographical Bachelor (**Spouse lives 100 miles or more away**) in order to participate in all MCRD San Diego Single Marine Program (SMP) trips. I have to take the transportation provided by the MCRD San Diego SMP to and from all SMP trips (NO POV'S). **I will show up on time for trips and stay for the entire event. All MCRD San Diego SMP trips are non-refundable.**

I understand fully that while participating in this event I am representing the United States Military and the MCRD San Diego Single Marine Program. I will conduct myself in such a way to honor both. I know I will be held to a high standard of the utmost ethical and moral behavior. I will be expected to act responsibly in a mature and dependable manner. I will be expected not to lie, cheat, nor steal. I will adhere to an uncompromising code of **personal integrity**, accountable for my actions and holding others accountable for theirs. Both my professional and personal demeanor shall be such that I may take pride in my actions.

**I affirm that all information entered on this document is true and correct. I understand this is my appointed place of duty. I understand that any misleading, incorrect or violation of these statements may result in the notification of my command SNCOIC and/or SgtMaj.**

\_\_\_\_\_  
Participants Printed Name

\_\_\_\_\_  
Participants Signature

\_\_\_\_\_  
Date

**Participation Authorization** (ensure Service Member shows up on time, this is their appointed place of duty)

**(SSgt or above Required)** Name: (Last, First) \_\_\_\_\_ Rank: \_\_\_\_\_

Battalion: \_\_\_\_\_ Section: \_\_\_\_\_ Cell Phone (Required): \_\_\_\_\_

I authorize the above MCRD San Diego Service Member to participate in the SMP Trip and will hold them accountable for attending this trip.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\_\_\_\_\_  
Date Received

\_\_\_\_\_  
Time Received

\_\_\_\_\_  
Staff Initials