OUTDOOR ADVENTURE SAFETY PLAN

Complete this form before departing on a hike/outdoor adventure and leave it with a reliable person who can be depended upon to notify authorities in case you do not return as scheduled. A word of caution: In case you are delayed, and it is not an emergency,inform those with your hiking plan of your delay in order to avoid an unnecessary search!

Name of Person Filing Pla	n:		
Address:			
Phone Number:		_ Cellphone Number:	
Emergency Contact:			
Medical Conditions:			
Names of others on the tri	p : Use Back of sheet if more pe	eople are on the trip	
Name:		Name:	
Address:		Address:	
Phone Number:		Phone Number:	
Cell Number:		Cell Number:	
Emergency Contact:		Emergency Contact:	
Medical Conditions:		Medical Conditions:	
TRIP DETAILS:			
Leaving From:			
Going To:			
Route Details:			
Departing on: DATE:	Time:	_ Returning on: DATE:	Time:
VEHICLE DETAILS:			
Description of Vehicle:			
Make: Model:	License# _	Planned Parking Spot:	
Boats, Kayaks, ATVs, etc			
Description of Vehicle:			
Make: Model:	License# _		
Emergency Radio: Type: Call Sig	Call Sign: Frequencies:		* ***
			COUNTRY