

Travel Plan

If not back by: _____ (day/date/time)

Call _____ (Search and Rescue, Sheriff Office)

Who (name, description, cell phone number, emergency contact #1 & 2)

1	_____
2	_____
3	_____
4	_____
5	_____

When, Where

TOPO Attached? Y / N

See Sketch other side Y /N

Start:	_____
1:	_____
2:	_____
3:	_____
4:	_____
5:	_____
6:	_____
7:	_____
8:	_____
End:	_____

What (Vehicle description, Make Model, Color, License number, distinguishing attributes)

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Why (Hiking, biking, camping, hunting, fishing, other _____)

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MAP

