Hiking Trip Data For Emergencies

Trip Data For (Name):

Trip Leader:

Date(s) of Trip:

General Area of Trip:

Register This Ranger Station:

Trailhead Name / Trail #:

Primary Destination:

Type of Trip (circle all that apply)

Base Camping, Walking; Scrambling; Climbing

Estimated Level of Difficulty

Severe; Strenuous; Moderate; Easy

Ability Level
Expert; Experienced; Beginner; Newbie

Other Party Members

Vehicle #1
License No.-#
Make/Model-
Color-
Owner-

Vehicle #2
License No.-
Make/Model-
Color-
Owner-

Personal Data
First Aid Certification-
Height =   ; Weight =
Age =   Hair color =

Medical Data
Personal Physician-
Medical Issues:

Allergies-
Prescription Medications Carried:

Fabric Colors
Pack-
Tent or Tarp -
Outer Storm Jacket -
Emergency Bivy-

Route Plan A Specifics
Intended Route in:

Intended Route out:

Intended Camp Locations:

Bailout Route(s):

Route Plan B Specifics:
Intended Route in:

Intended Route out:

Emergency/Survival Equipment Carried

Map and Compass
GPS
First aid kit
Extra Clothing
Bivy Sack
Rope
Fire Starter
Stove and Pot
Whistle
Lights/Headlamp
Personal Locator Beacon (PLB)-
FSR Radio (channel 1 for emergencies)
Cell Phone # and carrier-
2nd Cell Phone # in party-

Emergency Contacts:

Authorities Having Jurisdiction (usually county sheriff) (*Note*: 911 operators often can not determine the proper county or jurisdiction):

Best Estimate of Date and Time of Return:

Notify the Authorities if I/we do not return by:

Friends With Knowledge of Area of Trip: