



Everett Mountain Rescue



TRIP PLAN

To: (Name) _____, (phone) _____

If you haven't heard from me by (time) on (day) (date), call Search and Rescue at 911, report me as overdue, and be prepared to provide Search and Rescue with ALL of the information in this Trip Plan.

Activity Type (check all that apply)				
Hiking	Bicycling	Whitewater Kayak	Other:	
Climbing	Hunting	Sea Kayak		
Skiing	Fishing	Dirt Bike / ATV		
Snowshoeing	Boating (power)	Snowmobiling		

Name of participants	Age	Address	Phone	Medical issues

	Date	Time	Trailhead Location	Intended Destination
Departure from Trailhead				
Return to Trailhead				

If camping, list campsite areas.		Night #3
Night #1		Night #4
Night #2		Night #5

	Make	Model	Year	Color	License Plate
Vehicle					



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Weather Forecast	
Avalanche Forecast	
Communications	
Other Comments	

Gear with the group is marked					
First Aid Kit	Water: (__ liters)	Snowshoes	Stove	Harness	
Map	Food: (__ days)	Skis	Fuel: (__ days)	Ice Axe	
Compass	Water Pure Tabs / Filter	Beacon/Shovel/ Probe	Tent (color:_____)	Crampons	
Matches/ Lighter	Cell Phone	Hiking Boots	Waterproof Bivy Bag	Pickets	
Sunscreen	FRS Radio	Insulated Jacket	Foil Bivy Sack	Helmet	
Headlamp	GPS	Waterproof Jacket	Sleeping Bag	Other (list):	
Extra Batteries	PLB	Waterproof Pant	Sleeping Pad		
Whistle	Altimeter	Tool Kit	Rope		