



Sheriff's Office Search & Rescue

In cooperation with the United States Forest Service

Hiking Plan

Please PRINT and fill in appropriate information. Give this form to a responsible person who can provide the information to Search and Rescue, in the event that you do not complete your trip as scheduled.

Name of Hiker	Age	Address	Phone Number
#1			
#2			
#3			
#4			

Helpful Information:

Originating Trailhead Location: _____

Dates of Travel: _____

Planned Route: _____

Return Date and Time: _____

Trail Name and County: _____

Final Destination: _____

If camping, list campsite areas: Night #1 _____

Night #2 _____ Night #3 _____

Night #4 _____ Night #5 _____

Have you ever hiked to this destination before? Yes () No ()

Vehicle Make: _____ Model: _____ Year: _____

Color: _____ License Plate: _____

Please mark (√) all items that apply to your trip profile (items that you have with you):						
Cell Phone	Drinking Water	Sleeping Bag	Mountain Bike	Snow Gear		
First Aid Kit	Snacks	Tent	Compass	*FRS Radio CH #		
Flashlight	Matches	Hiking Boots	Sunscreen	Other (list):		
Map	Jacket	Tennis Shoes	Medicine			

*FRS stands for Family Radio Service. The Federal Communications Commission (FCC) defines it as a form of citizens band radio. FRS requires no license, has 14 channels and its range is limited to line of sight or approximately 2 miles.

List any medical considerations: _____

To Report A Missing Hiker - Call: 911



Sheriff's Office Search & Rescue

In cooperation with the United States Forest Service

Hiking Plan (continued)

Hiking Leader: _____ Home Phone: () - _____

Address: _____

Cellular Phone: () - _____ Pager: () - _____

Emergency Contact: _____ Phone: () - _____

Address: _____

SKETCH A MAP OF YOUR TRAVEL PLANS

To Report A Missing Hiker - Call: 911