

## Everett Mountain Rescue Trip Plan



To: (name)				, (phone)				
If you hav Search and ALL of the	e not h d Resc e infor	eard t ue at 9 matio	from me by 911, report n in this tri	(time) me as ove p plan.	on (day) erdue. Be prepar	of ( ed to )	month), call provide Search and Rescue with	
				A -4::4	T	• `		
Itilia		Bicycli		Type (check all that Whitewater Ka		Other:		
Hiking Climbing			Huntii		Sea Kayak	yak	Other.	
Skiing			Fishing		Dirt Bike / ATV		<del> </del>	
	hoeing		Boating (power)		Snowmobilin			
		Age					Medical Issues	
Name	(s)			(Name and Phone)				
Trailhea	ad	Date	Time	Trailhead Name / Location		ation	Intended Destination	
Departui								
Intermedi	ate							
Return								
Date	Date Camping Location			Site				
	ı							
Vehicle Year		'ear	r Make		Model	Colo	or License Plate	
1								
2								
3					<u> </u>			



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Weather Forecast	
Avalanche Forecast	
Communications	
Miscellaneous Information	

Group Gear (check all that apply)								
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					



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Trip Notes				