

If we do not report in by _____ AM/PM on _____ ,
Time Date

please call: _____
Emergency/Search Agency Phone

Report us as overdue/missing and provide the following information:

KAYAKERS:

Names _____

Age/Gender _____

Phone _____

Kayak colors (deck/hull) _____

PFD colors _____

Paddling clothes colors (top/pants) _____

Skill level _____

Medical info _____

GEAR CARRIED ONBOARD:

SIGNALING DEVICES

- Handheld flares
- Aerial flares
- Smoke
- Strobe
- Flashlights
- Chemical light sticks
- Camera flash
- Signal mirror
- Markers
- EPIRB

COMMUNICATIONS

- VHF radio Call sign _____
- Cell phone Number _____
- Hours of daily monitoring _____

EQUIPMENT

- Tent(s) Colors _____
- First-aid kit
- Fire-starting materials
- Water for _____ days
- Food for _____ days

LAUNCH SITE: _____

_____ Date _____ Time AM/PM

FINAL LANDING SITE: _____

_____ Date _____ Time AM/PM

VEHICLE:

_____ Year/make/model/color _____ License number

SHUTTLE VEHICLE (if applicable):

_____ Year/make/model/color _____ License number

PROPOSED ROUTE, CAMPSITES, AND ALTERNATIVES:

