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| ***PERSONAL OUTDOOR PLAN*** For  |
| *PERSONAL DETAILS* |
| Name: Address:DOB:  | **Photograph** | Travelling with:Emergency Contact: |
| ***COMMUNICATION DETAILS - TELEPHONE*** |
| Owner:  | Mobile Number:  | Network:  |
| Owner:  | Mobile Number:  | Network:  |
| ***PLB CARRIED***  |
| Owner:  | Make & Model:  | Serial No:  |
| Hex ID:  | Registration Info:  |
| ***MEDICAL CONDITIONS / ALLERGIES / MEDICATION CARRIED*** |
|  |
| ***VEHICLE DETAILS***  |
| Owner:  | Make:  | Model:  | Colour:  | Plate Number:  |
| ***MAP INFORMATION*** |
| Map Sheet:  |  Datum:  |
| ***ACTIVITY PLAN*** |
| Start Date:  | Start Time:  | Start Point:  |
| End Date:  | End Time: | Finish Point:  |
| Leg | From | To | Direction | Distance | Ground Description |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |

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| ***EMERGENCY PLAN*** |
| Cut-off Date & Time: |
| **Emergency Situation:** In an emergency situation, we will: |
| ***EQUIPMENT***  |
| **Personal Equipment** | **Activity Equipment** | **Food & Water** |
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| ***OUTDOOR TRAINING / EXPERIENCE*** |
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