Los Angeles County Sheriff's Department Search and Rescue – Hiking Plan

Please PRINT out this form and fill in the appropriate information. Give this form to a responsible person who will provide this information to Law Enforcement / Search and Rescue, in the event you do not complete your trip as scheduled. Please enter the Hiking / Camping Group Leader in the #1 row. Use the back of this form for additional hikers, campsites and vehicles.

	Name of Hiker/Camper	Age	Address	Phone Number	Known Medical Issues
1.					
2.					
3.					
4.					
5.					
6.					

Hiking Plan Details

Starting Trailhead / Entrance Name: _____

Start Date of Trip: _____ Return Date and Time: _____

Ending Trailhead / Exit Name: _____

If camping please list your planned campsites and dates.

Date	Camp Name / Location	Date	Camp Name / Location

Vehicle Information (if left at start or end point) Vehicle Make: _____ Model: _____

License Plate (state): _____ Color: _____ Year: _____

Please mark all of the supplies you are taking on your hike:

Phone: _____ GPS: _____ SPOT/PLB: _____ Food: _____ Water: _____

Jacket: _____ Tent: _____ Sleeping Bag: _____ Pack: _____ Map/Compass: _____

Whistle: _____ First Aid: _____ Flashlight: _____ Dog: _____ Hiking Boots: _____

Hiking/Trekking Poles: _____ Mtn Bike: _____ Snow Gear: _____

To Report a Missing Hiker – Call Your Local Sheriff's Station or Police Department

Search and Rescue Hiking Plan Continued:

Trip Leader: _____ Home Phone: _____

Home Address: _____ Cell Phone: _____

Emergency Contact: _____ Phone: _____

Address: _____ Cell Phone: _____

SKETCH A MAP OF YOUR TRAVEL PLANS

To Report a Missing Hiker – Call Your Local Sheriff's Station or Police Department