

# PLANNED ROUTE CARD

NAME

MOBILE

DATE

ADDRESS (PERMANENT)

LOCAL ADDRESS OR BASE

HOME CONTACT

LOCAL CONTACT

TIME OF DEPARTURE

PLANNED ROUTE

NUMBER IN PARTY

NAMES

BAD WEATHER OPTIONS/ALTERNATIVES

WALK START TIME

ESTIMATED TIME OF RETURN

VEHICLE REG(S)

EQUIPMENT CARRIED

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> MAP & COMPASS  | <input type="checkbox"/> FIRST AID KIT | <input type="checkbox"/> GROUP SHELTER | <input type="checkbox"/> WATERPROOFS FOR ALL |
| <input type="checkbox"/> EMERGENCY FOOD | <input type="checkbox"/> MOBILE PHONE  | <input type="checkbox"/> WHISTLE       | <input type="checkbox"/> HEADTORCH           |

LEFT WITH

REMEMBER TO CALL AFTER YOU'VE FINISHED YOUR WALK!

Country  
**walking**

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