



HIKING PLAN

S.C. Department of Natural Resources

Complete this form before departing on a hike and leave it with a reliable person who can be depended upon to notify the authorities in case you do not return as scheduled. A word of caution: In case you are delayed and it is not an emergency, inform those with your hiking plan of your delay in order to avoid an unnecessary search!

1. Name of person filing this plan: _____

Phone #: _____

2. Name(s) of others on hike: _____ Age _____ Address _____ Phone # _____

Name(s) of others on hike:	Age	Address	Phone #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. Trip Plans

Leaving from: _____ Going to: _____

Route Details: _____

Departing on: _____ | _____ AM PM Returning: _____ | _____ AM PM
date time date time

And, in no event, returning later than: _____ | _____ AM PM
date time

4. Alternate route if bad weather is encountered: _____

5. Description of automobile _____ Trailer License #: _____

Make: _____ Color: _____ License #: _____ Where Parked: _____

6. If not returned by: _____ | _____ AM PM
date time

Call Local Authority: _____ Phone #: _____