

# Trip Planning Worksheet

Fill in the requested information below, and then submit to Trip Coordinator.

**Trip Leader:** \_\_\_\_\_

**Assistant Trip Leader:** \_\_\_\_\_

Has either leader been on this paddle before? Y / N

**Day(s):** Sat. Sun. Mon. Tues. Wed. Th. Fri. **Date(s):** \_\_\_\_\_

**Trip name/Destination:** \_\_\_\_\_

**County:** \_\_\_\_\_ **City:** \_\_\_\_\_

**Rating: Conditions / Skills:** 1 2 3 4 5 **Endurance:** A B C D \_\_\_\_\_

(See **Trip Rating System** to translate this rating into conditions/skills and endurance.)

**Max # of participants:** \_\_\_\_\_ **Club members only?** Yes No

**Equipment/Clothing Required** (in addition to normal requirements):

Boat Lights: \_\_\_\_\_ Flashlight \_\_\_\_\_ Sprayskirt: \_\_\_\_\_ Cold Water Gear: \_\_\_\_\_

**Typical Hazards:** Check all that apply under normal conditions.

Heavy seas \_\_\_\_\_ Wind: \_\_\_\_\_ Strong currents: \_\_\_\_\_ Tidal race: \_\_\_\_\_

Boat traffic: \_\_\_\_\_ High waves/surf: \_\_\_\_\_ Sandbars/Rocks: \_\_\_\_\_

Other considerations: \_\_\_\_\_

**Route:** Meeting Time: \_\_\_\_\_AM/PM Estimated take-out time: \_\_\_\_\_AM/PM

Paddling distance (miles): \_\_\_\_\_ Expected # of Hours on water: \_\_\_\_\_

Put-in Location: \_\_\_\_\_

Takeout Location (if different): \_\_\_\_\_

Likely lunch or stopping spots: \_\_\_\_\_

Route alternatives if bad weather:

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