



# Snohomish County Sheriff's Office

## Search and Rescue

in cooperation with  
United States Forest Service



### Hiking Plan

Please PRINT and fill in appropriate information. Give this form to a responsible person who can provide the information to Search and Rescue, in the event that you do not complete your trip as scheduled.

Name of Hiker	Age	Address	Phone Number
#1			
#2			
#3			
#4			

#### Helpful Information:

Originating Trailhead Location: \_\_\_\_\_

Dates of Travel: \_\_\_\_\_

Planned Route: \_\_\_\_\_

Return Date and Time: \_\_\_\_\_

Trail Name and County: \_\_\_\_\_

Final Destination: \_\_\_\_\_

If camping, list campsite areas: Night #1 \_\_\_\_\_

Night #2 \_\_\_\_\_ Night #3 \_\_\_\_\_

Night #4 \_\_\_\_\_ Night #5 \_\_\_\_\_

Have you ever hiked to this destination before? Yes ( ) No ( )

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

Color: \_\_\_\_\_ License Plate: \_\_\_\_\_ State: \_\_\_\_\_

Please mark (√) all items that apply to your trip profile (items that you have with you):

Cell Phone	Flashlight/Extra Batteries/Bulb	Map/Compass	Shelter	Water/Food
Climbing Gear	FRS Radio	Matches/Fire Starter	Signal Device/Whistle	Other (list):
Extra Clothing	GPS	Mountain Bike	Snow Gear	
First Aid Kit	Knife	PLB	Sunscreen/Sunglasses	

List any medical considerations: \_\_\_\_\_

**TO REPORT A MISSING HIKER – CALL 911**



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**Hiking Plan  
(continued)**

Hiking Leader: \_\_\_\_\_ Home Phone: ( ) - \_\_\_\_\_

Address: \_\_\_\_\_

Cellular Phone: ( ) - \_\_\_\_\_ Pager: ( ) - \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: ( ) - \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

SKETCH A MAP OF YOUR TRAVEL PLANS

Large empty rectangular box for sketching travel plans.

For more copies, go to: <http://www1.co.snohomish.wa.us/Departments/Sheriff/>

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