

Troop 282 Day Trip Planner



Trip Name: _____

Trip Date: _____ Cost Per Scout: _____

Departure Time: _____ Return Time: _____

Trip Location and Details (Including Alternates)

Driving Instructions

Trip Purpose and Goals

Participant Requirements

Mishap Mitigation

Attached Documents

- Driving map and/or directions
- List of drivers with mobile phone numbers
- Trail map with travel route
- List of participants with leaders noted

Leader Checklist

- | | |
|--|---|
| <input type="checkbox"/> Tour permit | <input type="checkbox"/> Permission slips |
| <input type="checkbox"/> Site registration | <input type="checkbox"/> Ten essentials |
| <input type="checkbox"/> Troop first aid kit | <input type="checkbox"/> Itinerary |
| <input type="checkbox"/> Medical forms | <input type="checkbox"/> SPL map session |