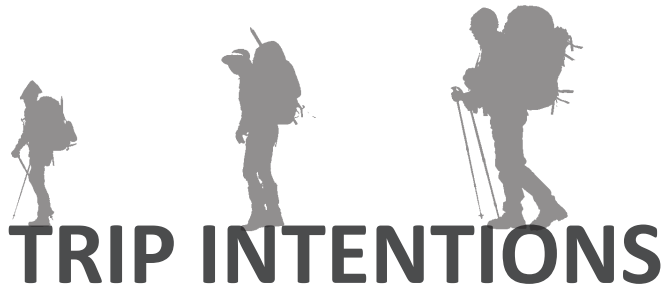




NELSON TRAMPING CLUB
www.nelsontrampingclub.org.nz



- Complete all applicable sections accurately. Sections marked with an * must be completed.
- Two copies of this form must be made. One copy should be printed and carried with the leader on the trip. In an emergency, the Police require details of the party.
- A second copy could be left with the Contact Person (e.g. leader's spouse). While this is optional, you must do the next step.
- Email this editable form to our designated SAR contacts: **Kate Krawczyk, Pat Holland & Chris Louth** (see over for their contact details).

PARTY MEMBERS:

1 *Name of Leader: _____ Age: _____ *No. in Party: _____ *Home Phone No: _____
 *Address: _____ *Mobile Phone: _____
 *Next of Kin (or alternative contact) Name: _____ Home Phone: _____ Work Phone: _____

2 *Name: _____ Age: _____ Emergency Contact: _____ Mobile Phone: _____
 Address: _____ Medical Conditions: _____

3 *Name: _____ Age: _____ Emergency Contact: _____ Mobile Phone: _____
 Address: _____ Medical Conditions: _____

4 *Name: _____ Age: _____ Emergency Contact: _____ Mobile Phone: _____
 Address: _____ Medical Conditions: _____

5 *Name: _____ Age: _____ Emergency Contact: _____ Mobile Phone: _____
 Address: _____ Medical Conditions: _____

6 *Name: _____ Age: _____ Emergency Contact: _____ Mobile Phone: _____
 Address: _____ Medical Conditions: _____

7 *Name: _____ Age: _____ Emergency Contact: _____ Mobile Phone: _____
 Address: _____ Medical Conditions: _____

8 *Name: _____ Age: _____ Emergency Contact: _____ Mobile Phone: _____
 Address: _____ Medical Conditions: _____

9 *Name: _____ Age: _____ Emergency Contact: _____ Mobile Phone: _____
 Address: _____ Medical Conditions: _____

10 *Name: _____ Age: _____ Emergency Contact: _____ Mobile Phone: _____
 Address: _____ Medical Conditions: _____

VEHICLES:

1 *Vehicle Make: _____ Regstrn No: _____ Colour: _____ Vehicle Parked at: _____

2 *Vehicle Make: _____ Regstrn No: _____ Colour: _____ Vehicle Parked at: _____

TRIP INTENTIONS:

- A** Journey Start Date: _____ Date Due Out: _____ Panic Date: _____ Time: _____
- Planned Route & Area of Travel: (this information is critical in assisting SAR to locate your party – please be as detailed as possible).
Area (e.g. National or Forest Park.) : _____ Track Name: _____
- B** Planned Route: _____

- Accommodation (e.g. Huts): _____
- C** Alternative Route (if weather or circumstances change intentions): _____

- D** Are you returning to Nelson? YES / NO
If 'no', where is your next destination? _____

CONTACT PERSON:

*Name: _____ *Home Phone No: _____ Mobile Phone: _____

- >** *Note: This contact person must be notified with any change of trip intentions; then they must notify Pat, Lawrie or Chris. If the party has not made contact by the Panic Date, this contact person must inform the Police, (Dial 111) & then Pat, Lawrie or Chris.*

EMERGENCY CONTACTS:

If you activate a club Personal Locator Beacon, the Search And Rescue base will attempt to contact the following people for information:

- 1** **Kate Krawczyk**, NTC President: Phone: 027 244 4144. [click to EMAIL](#).
- 2** **Pat Holland**, NTC Committee: Phone: (03) 539 1340. [click to EMAIL](#).
- 3** **Chris Louth**, NTC Programme Editor: Phone: (03) 547 6628. [click to EMAIL](#).
- 4** **Darryl @ Rollos Outdoor Centre**, 12 Bridge St, Nelson: Phone: (03) 548 1975

Note: If you change your trip intentions, it is imperative that you notify one of the above people. It could save SAR a lot of time and money.

- 5** Search & Rescue base: **0508 472 269 : 04 577 8030** (Wellington) or direct to the Police: **111**

LOCATOR BEACONS:

*Club Beacon Number: _____ Private Beacon: (Owner's Name) _____