



CANYONING TRIP PREPERATION FORM

TRIP INFORMATION

Canyon	.....	Difficulty	V	A	.....
Location	.....	Alt. Entrance	.....		m
Highest rappel	.....	Alt. Exit	.....		m
Total duration	.....	Water level	High | Normal | Low		.....
Walk to entrance	.....	Side canyon inflow	.....		.....
Canyoning time	.....	Water catchment area	.....		.....
Retour time	Stone type
Likes	Dam or barrage

WHERE ARE THE ESCAPES - NOTES - HAZARDS

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PLANNING

Meeting time
Time of departure
Arrival parking canyon
Start canyon
Finish canyon
Time arrival basecamp

TRIPLEADER(S)

Name Phone number
Name Phone number

PARTICIPANT(S)

MEDICAL INFORMATION

1. Name: .....	.....
2. Name: .....	.....
3. Name: .....	.....
4. Name: .....	.....
5. Name: .....	.....
6. Name: .....	.....
7. Name: .....	.....
8. Name: .....	.....

IN CASE OF EMERGENCY

Emergency number:

Basecamp name and number:

Address nearest hospital:

Names of the rear guards:

Start of the emergency plan:

What will the rear guards do: