## **FLOAT PLAN**

Complete this form and leave it with a reliable person before going out on a boat. They should notify the Coast Guard and local authorities if you do not return as scheduled. Inform the person with your float plan if you will be delayed for non-emergency reasons.

ENT RIVER
8 5
1
EST. 1962
Parks &

	If not returned by:			m pm		Recreation No. 10 P P C
	date	tim				
	Call:Emergency/sear		at Consul	(	)	
1.	Description of boat: Type:		Color:		Make:	
	Registration number:	·	Trim:	Length:	N	ame:
2.	Name, age, and address, and	d phone # of ea	ich person on t	rip:		
3.	Gear/equipment:					
	Life Jacket (PFD) color(s):_					
		Flashlight	Whis	tle	Tent	
	Mirror	Anchor	Padd	les	First aid kit	
	Smoke Signals	Raft or dinghy	Horn			
	Water	Food	other	:		
4.	Engine: Yes No Type:		Horsepowei	r: # of e	ngines:	Fuel capacity:
5.	Radio: Yes No Type:		Frequencies	::	Call sign: _	
6.	Leaving from:			Going to:		
	Departing on: date	/ time	am pm	Returning:	date tim	
	Route/stops along the way:					
7.	Vehicle: License Plate #:		Make:	Model:		Color:
	Parked at			Boat T	railer license pla	te #: