

# FLOAT PLAN

Name (print)	Age	Paddling exp.	Kayak type	Kayak color	PFD Color	Medical Info

Emergency Contacts

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Launch time and location

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Take out time and location and expected return time

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Intended Route

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Safety equipment (radio, emergency beacon, flares, overnight equipment, etc)

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Plan of action if not back by latest expected return date

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Misc information

<b>Vehicle Make/Model:</b>	
<b>License Plate:</b>	<b>State:</b>
<b>Location:</b>	