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| --- | --- | --- |
| **Trip name:** | **Start date**: | **End date**: |
| **Leader**:  **Mobile no**:  **Shore contact**:  **Phone no/s**:  **Trip Grade**:  **Estimated distance**:  **Group Size**: | **LOCATION / VENUE** | |
| **Departure point**:  **Via**:      **End point**:  **Expected check-in time**:    (Shore contact to be notified on completion of the trip) | |
| **TRIP DETAIL (include camp locations, parking / car shuttle details etc.)** | | |
|  | | |
| Please ensure a **risk assessment** has been completed and shared on the Spond event.  (Part-completed template available in “files”) A copy should also be carried by the trip leader. | | |
| **PLAN B and any additional information** | | |
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| Paddler name | Mobile number | Colour of kayak | Paddling level | First aider  Y/N |
| Relevant medical info | | | Emergency contact name and number | |
|  | | | | |
| Paddler name | Mobile number | Colour of kayak | Paddling level | First aider  Y/N |
| Relevant medical info | | | Emergency contact name and number | |
|  | | | | |
| Paddler name | Mobile number | Colour of kayak | Paddling level | First aider  Y/N |
| Relevant medical info | | | Emergency contact name and number | |
|  | | | | |
| Paddler name | Mobile number | Colour of kayak | Paddling level | First aider  Y/N |
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| Paddler name | Mobile number | Colour of kayak | Paddling level | First aider  Y/N |
| Relevant medical info | | | Emergency contact name and number | |
|  | | | | |
| Paddler name | Mobile number | Colour of kayak | Paddling level | First aider  Y/N |
| Relevant medical info | | | Emergency contact name and number | |
|  | | | | |

**PADDLERS IN GROUP** *- cut & paste or copy from Paddler Information Forms*

*Please ensure this information is securely destroyed after the event has taken place*

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| --- | --- | --- | --- | --- |
| Paddler name | Mobile number | Colour of kayak | Paddling level | First aider  Y/N |
| Relevant medical info | | | Emergency contact name and number | |
|  | | | | |
| Paddler name | Mobile number | Colour of kayak | Paddling level | First aider  Y/N |
| Relevant medical info | | | Emergency contact name and number | |
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| Paddler name | Mobile number | Colour of kayak | Paddling level | First aider  Y/N |
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| Paddler name | Mobile number | Colour of kayak | Paddling level | First aider  Y/N |
| Relevant medical info | | | Emergency contact name and number | |
|  | | | | |
| Paddler name | Mobile number | Colour of kayak | Paddling level | First aider  Y/N |
| Relevant medical info | | | Emergency contact name and number | |
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