

OUTDOOR PROGRAM CHECKLIST

Date of Program _____ **Location** _____

I. Administration

- | | |
|--|--|
| <input type="checkbox"/> Tour permits | <input type="checkbox"/> Licenses (fishing, boats, etc.) |
| <input type="checkbox"/> Parents' permission/information | <input type="checkbox"/> Camp cost |
| <input type="checkbox"/> Insurance | <input type="checkbox"/> Local requirements |
| <input type="checkbox"/> Budget done | <input type="checkbox"/> Permits/reservations |
| <input type="checkbox"/> Personal health histories | <input type="checkbox"/> _____ |

II. Leadership

- | | |
|--|---|
| <input type="checkbox"/> Second leader _____ | <input type="checkbox"/> Third leader _____ |
|--|---|

III. Transportation

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> Driver _____ | <input type="checkbox"/> Driver _____ |
| <input type="checkbox"/> Driver _____ | <input type="checkbox"/> Driver _____ |
| <input type="checkbox"/> Equipment hauled by _____ | |

IV. Location

- | | |
|--|---|
| <input type="checkbox"/> Maps to and from _____ | <input type="checkbox"/> Arrival time _____ |
| <input type="checkbox"/> Driver time _____ | <input type="checkbox"/> Departure time _____ |
| <input type="checkbox"/> Special gear needed _____ | |