Venturing Activity Planning Worksheet

Position	Name	Phone No.	Email
Activity Chair			
VP of Program			
Associate Advisor of Program			
Consultant			

What is our goal?

Where will we go?

When will we go?

Departure/Arrival	Day	Date	Time
Departure			
Arrival			
Departure			
Arrival			

What will we do when we get there?

Day 1	
Day 2	
Day 3	
Day 4	

What equipment, supplies, and reservations will we need?

Personal Gear			
Item	Quantity	Comments	

Crew Gear			
Item Quantity Comments			

Permits and Reservations			
Item	Quantity	Comments	

Lodging	

Other

How will we get there?

Please attach maps/driving directions for each stop of the trip.

How can we manage risk?

Analysis and Management of Risk (What-If Plan)

Hazard	Severity	Frequency	Assessment	Corrective Action(s)

Emergency Communications

Position	Name	Phone No.	Email
Chief Emergency Contact (Home)			
Nearest EMS			
Council Scout Executive			

Nearest Medical Facility to Adventure Location (including address and contact information)

First-Aid Certified Members Attending the Adventure

Position	Name	Phone No.	Email
First-Aid Certified Members			
CPR-Certified Members			
Certified Lifeguards (if needed)			

Other Required Training (may be event-specific)

Position	Name	Phone No.	Email
Hazardous Weather			
Climb On Safely			
Safe Swim Defense			
Safety Afloat			
Other			

Emergency Response Plan

Weather Forecast (as of _____)

Forecast	Day 1	Day 2	Day 3	Day 4
High				
Low				
Chance of Precipitation				

Allergies and Medical Concerns

Venturer/Advisor	Allergy/Medical Concern	Prevention/Treatment

How much will it cost?

Budget Item	Total Cost	Per-Person Cost
Transportation		
Lodging		
Food		
Training		
Use or Participation Fees		
Insurance		

Equipment Purchase or Rental	
Side Trips and Tours	
Promotion	
Contingency	
Total	

Contact Lists

Venturers Participating in the Adventure

Name	Cell Phone No.	Email	

Advisors Participating in the Adventure

Name	Current YPT?	Cell Phone No.	Email

Parent/Guardian Emergency Contact Information

Venturer Name	Parent/Guardian Name	Parent/Guardian Cell Phone No.	Parent/Guardian Email