

**WALK LEADERS REPORT**

*(Please print your responses clearly and attach the signed walk sheet)*

LOCATION: \_\_\_\_\_ WALK LEADER: \_\_\_\_\_

DATE(S): \_\_\_\_\_

TYPE OF WALK:  DAY WALK       BASE CAMP       THRU-WALK

TRIP GRADE:       Easy       Moderate       Difficult       Experienced Walkers Only

WALK DISTANCE: \_\_\_\_\_ km                      TIME TAKEN: \_\_\_\_\_ hrs

WEATHER: \_\_\_\_\_

TIME AND DAY DEPARTED: \_\_\_\_\_

TIME AND DAY RETURNED: \_\_\_\_\_

DISTANCE TRAVELLED: \_\_\_\_\_ TRAVEL TIME: \_\_\_\_\_

TYPE OF TRANSPORT: \_\_\_\_\_

NUMBER ATTENDED: \_\_\_\_\_

FACILITIES AVAILABLE: \_\_\_\_\_

\_\_\_\_\_

CONTACT FOR PERMISSION / ACCESS: \_\_\_\_\_

CONTACTED FOR FURTHER INFORMATION: \_\_\_\_\_

MAPS: \_\_\_\_\_

DETAILS OF WALK: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

RECOMMENDATIONS FOR FUTURE TRIPS: \_\_\_\_\_

\_\_\_\_\_

Where there any Medium or Serious Incidents during the walk? YES  NO

**If YES, you must submit an Incident Report Form.**