

## 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