



Trip Coordinator's Report

Calgary Outdoor Recreation Enthusiasts Society (CORE)

Date (mm/dd/yyyy): ____/____/____ Type of event (Hike/Other-specify): _____

Trip Name/Area/Prov: _____

Coordinator(s): _____

Distance (Calgary to Trailhead) kms: _____ Distance (Other location to Trailhead) Place/kms: _____ Shuttle: (Y/N)

Distance (Trailhead to Trailhead) kms: _____ Elevation gain (m): _____ Difficulty Rating: _____

Trip time Trailhead to Trailhead: _____ # of members: _____ # of Guests: _____

Trail conditions (circle one): Good / OK / Poor Specifics (mud/snow(cm)/rough trail, etc): _____

Injuries/ Incidents/Accidents : _____

Comments for Database (Good season for trip? Bugs? Crowded? Bikes? Route not clear? Obstacles? Points of Interest, etc):

#	Member Name (please print legibly)	Member Initials	Member Contact Phone #	Emergency Contact Phone #	Coordinator Initial*
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
#	Guest Name (please print legibly)	Member Initials	Guest Contact Phone #	Emergency Contact Phone #	Coordinator Initials
1					
2					

* Trip Coordinator: Verify current membership and initial. Attach **guest** waiver to trip report.
 Leave this form in your vehicle at the trailhead in case of emergency.
 E-mail form to: mailbox@corehike.org or give to Executive Trip Coordinator or Executive Member at CORE monthly meeting.
 See www.corehike.org for Coordinators' Guidelines
 October 2014