

Winter Day Use Hiking Registration Form for Above Tree Line

Day hike date/dates: _____ Number in Party: _____

(Please include backup dates for inclement weather, if applicable)

(If Solo, please fill out Solo Form also)

Itinerary: _____

Any prior winter experience in Baxter State Park? Or other wilderness areas? _____

Name: _____ Mailing address: _____

Phone Number: _____

Motor Vehicle information: Make _____ Color _____ Plate # _____

Where are you parking: _____

Emergency Contact: _____ Phone Number: _____

I attest that to the best of my knowledge, all the members are capable and fit enough to ensure our safe completion of our proposed itinerary.

Signature: _____