SAMPLE FLOAT PLAN

1. Name: ____________________________
   Address: __________________________
   __________________________
   Phone/E-mail: ______________________

2. Boat Description
   Type: ____________________________
   Color: ____________________________
   Length: ____________________________
   Registration No.: ___________________
   Choose one:
   ___ inboard
   ___ outboard
   ___ sail
   ___ other

3. People Aboard: (Name, Address, Phone)
   __________________________
   __________________________
   __________________________

4. Radio: ___ yes ___ no
   CB: ___ yes ___ no
   VHF: ___ yes ___ no
   Cell phone: ___ yes ___ no

5. Automobile
   Make/Style: ________________________
   Color: ____________________________
   License: __________________________
   Parked at: _________________________

6. Trip Information
   Leaving From: _____________________
   Date: ________________ Time: __________
   Returning To: _____________________
   Date: ________________ Time: __________

7. EMERGENCY
   If not returned by: ___________________
   Date: ________________ Time: __________
   contact: ____________________________

________________________
Signature
Date

Complete this information before going boating
and leave it with a reliable friend. WHEN YOU
RETURN, REMEMBER TO CONTACT YOUR FRIEND.