

# VOLUNTARY CLIMBING REGISTER

Mt. Baker Ranger District, Mt. Baker-Snoqualmie National Forest



*Climbing parties are encouraged to submit a register form for their climbs. Registration is optional. It could provide valuable information in the event of search or rescue. If you are overdue the district will not initiate search or rescue but will notify your emergency contact. Search and rescue operations are conducted by Whatcom County Sheriff's Department.*

## **PARTY LEADER** *(List additional party members on back)*

Name \_\_\_\_\_ Age \_\_\_\_\_

Phone Number (\_\_\_\_) \_\_\_\_\_ Zip Code \_\_\_\_\_

Number of People in Party \_\_\_\_\_ *(Group size in wilderness is restricted to 12 people total.)*

Name & Phone # to Contact if Overdue: \_\_\_\_\_  
*(preferably someone with knowledge of your plans)*

## **PLANNED ROUTE INCLUDING CAMPS/BIVOUACS AND PEAKS:**

**VEHICLE** Make & Model \_\_\_\_\_ Color \_\_\_\_\_

License Plate Number & State \_\_\_\_\_ Parking Location \_\_\_\_\_

TODAY'S DATE \_\_\_\_\_

**IMPORTANT: EXPECTED RETURN DATE / TIME**

### **SIGN OUT**

*To Be Completed Upon Return*

SIGN-OUT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ TIME \_\_\_\_\_

*During office hours your name will be moved to a separate sign-out form to protect personal information.*

Did you summit?  Yes  No

Comments/Route conditions:

➡ ➡ ➡ **OVER**

**ADDITIONAL PARTY MEMBERS** (Reminder: Group size in Wilderness is restricted to 12 people.)

NAME	AGE	CONTACT NAME & PHONE NUMBER
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____
4 _____	_____	_____
5 _____	_____	_____
6 _____	_____	_____
7 _____	_____	_____
8 _____	_____	_____
9 _____	_____	_____
10 _____	_____	_____
11 _____	_____	_____

**EQUIPMENT CARRIED**

SHELTER TYPE and # of (tent, bivy) \_\_\_\_\_

SHELTER COLOR(S) \_\_\_\_\_

PACK COLOR(S) \_\_\_\_\_

JACKETCOLOR(S) \_\_\_\_\_

- |  |                                    |   |                                     |
|--|------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> Rope(s)       | <input type="checkbox"/> Ice Axes  | <input type="checkbox"/> Crampons             | <input type="checkbox"/> Compass    |
| <input type="checkbox"/> Map           | <input type="checkbox"/> Altimeter | <input type="checkbox"/> First Aid Kit        | <input type="checkbox"/> Extra Food |
| <input type="checkbox"/> Signal Device | <input type="checkbox"/> GPS unit  | <input type="checkbox"/> Cell Phone (# _____) |                                     |

*Note: This is not a recommended equipment list!*

**PLEASE READ & SIGN BELOW**

The information you have provided on this register could be useful if a search or rescue is necessary for your group. Make sure your contact knows your intentions and the actions you want taken should you become overdue. *(If you are overdue the district will not initiate search or rescue but will notify your emergency contact.)*

I understand that this Voluntary Climbing Register is optional. I agree to notify the Ranger Station promptly upon my return from this trip.

\_\_\_\_\_  
*Signature of Party Leader*

\_\_\_\_\_  
*Today's Date*

If you cannot sign-out in person, please call one of the offices listed below.

**Mt. Baker Ranger District Office**  
810 State Route 20  
Sedro-Woolley, WA 98284  
**(360) 856-5700 ext. 515**

**Glacier Public Service Center**  
Mt. Baker Highway  
Glacier, WA 98244  
**(360) 599-2714**