Please complete this form if you intend to **undertake the Carnarvon Great Walk**.

**If you are reported overdue, this form can provide important information that may be used to assist emergency services in the event of a search and rescue operation.**

__________________________________________________________________________

You are **strongly advised** to leave these details with a responsible contact person (e.g. friend, relative or a person at the accommodation centre where you are staying). You are responsible for advising this contact person of your safe return. If this person is concerned about your safety, they should contact the police by **phoning triple zero (000)**.

A copy of this form can also be sent to QPWS Roma, 36 Quintin Street, Queensland 4455. This information will inform the Queensland Parks and Wildlife Service about visitor use of the Carnarvon Great Walk.

**Please note:** The Queensland Parks and Wildlife Service will not check that you have returned from your trip.

**USE CAPITAL LETTERS**

Name of group leader: ____________________________________________________________

Address: __________________________________________ Postcode: ________________

Phone: Daytime ________ A/Hrs: ________ Mobile: ____________________________

If you will be away from home, please provide your local address/accommodation details:

_________________________________________________________________________

Phone: ____________________________

Total number in group: ______________

Number by age group: under 10 ______; 11-17 ______; 18-35 ______; 36-50 ______; 50+ ______

Please list all known illnesses/medical conditions of group members:

_________________________________________________________________________

_________________________________________________________________________

Vehicle registration: ______________ Vehicle make and colour: _______________________

Vehicle parking location: ________________________________________________________

Remote bushwalking experience level:

☐ Beginner / inexperienced    ☐ Some experience    ☐ Skilled / very experienced
Proposed route including destinations and camping areas:

Start date .......................................................... and time (am/pm): ........................................

Day 1 ................................................................. Day 5 .................................................................

Day 2 ................................................................. Day 6 .................................................................

Day 3 ................................................................. Day 7 .................................................................

Day 4 ................................................................. Day 8 .................................................................

Intended finishing date ______________ and time (am/pm): ________________________________

Emergency contact person: (visitors from overseas must provide an Australian contact)

Name: ..................................................................................

Address: .............................................................................. Postcode: ................................

Phone: Daytime __________________ A/Hrs: ___________ Mobile: __________________________

Please use the following checklist to ensure that you are prepared to undertake the Carnarvon Great Walk.

☐ I am aware that there is no mobile phone reception along the Carnarvon Great Walk.

☐ I am not walking alone. (A party of at least three people is desirable.)

☐ Someone will miss me if I don’t return at the expected time. I have notified an emergency contact person (details above) and will let them know when I return. They understand they should contact police if I am .......... hours/days overdue.

☐ I am fully briefed on where I am going and have planned my route.

☐ I am carrying a map and compass and know how to use them.

☐ I am carrying an EPIRB (Emergency Position-Indicating Radio Beacon), know how to use it and will activate it only in a life-threatening situation or to aid a search that has already commenced.

☐ I am carrying a GPS (Global Positioning System).

☐ I am carrying a Satellite phone.

☐ I am carrying extra food and water in case of delays.

☐ A member of my group is carrying a first-aid kit.

☐ I am capable of providing basic first-aid or there is a first aider in the group.

☐ All group members have suitable hiking gear including warm and waterproof clothing and sturdy footwear.

☐ I understand what risks I might encounter by walking in this area and how to avoid these risks. I know that I should:

☐ avoid snakes (detour around and do not provoke them)

☐ drink plenty of water to avoid dehydration

☐ wear a hat and sunscreen

☐ never feed wildlife

☐ never jump or dive into water

☐ do not attempt to cross flooded creeks or rivers

☐ keep clear of cliff edges and waterfalls

☐ walk in the cool parts of the day

☐ treat any water obtained from creeks, dams or taps

☐ As designated leader of the group, I undertake to ensure that all other persons within the bushwalking group have been made aware of the details and physical demands of this walk.

Signature of group leader ............................................................. Date

Revised February 2015