

**Sutherland Bushwalking Club Inc (SBC)  
ACTIVITY ORGANISER'S TRIP REPORT**



**This report must be completed and returned to SBC as soon as possible after your activity.**

(Please email to [tripreports@sutherlandbushwalkers.org.au](mailto:tripreports@sutherlandbushwalkers.org.au), or mail to Club Secretary, PO Box 250, Sutherland NSW 1499)

Activity Organiser	Activity Type (Bushwalk/Paddle/Ride)	Date

**Full route details** Please provide details of your activity including the route taken (type in directly or paste into formula bar above for cell B11)

**Visitors (Adult Visitors ONLY)**

**NOTE: No overnight or multi-day activities for visitors**

Please ensure that any risks associated with your activity have been outlined clearly to any visitors before they participate in this activity.

Remind visitors that they are voluntarily participating in this activity and that they choose to do so with any inherent or associated risks.

**Ensure that visitors have understood and signed the risk waiver on the Visitor Form BEFORE the activity and then attach it to the trip report.**

**Post Trip Incident Report**

Injured Person's Name	Signature	Date of Incident	Activity Organiser Signature	Witness Name	Witness Signature

**Incident Description** Please provide details of the incident and any action taken.

Save with file name 'date of activity + your initials'

eg. Feb29 JH trip report

Please email to: [tripreports@sutherlandbushwalkers.org.au](mailto:tripreports@sutherlandbushwalkers.org.au)

**Sutherland Bushwalking Club Inc (SBC)**

**Full Attendance List**

Activity Location: \_\_\_\_\_

Enter or copy & paste your attendance list here.

	First Name	Family Name	Phone	Car Rego	Emergency Contact Name	Emergency Contact Phone	Visitor (x)
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							

No. of Participants: \_\_\_\_\_