



24 HOUR TRIP PACK LIST

Duffel (To change to before Hike)

- ☐ Shoes _____
- ☐ Socks _____
- ☐ Underwear _____
- ☐ Trail Pants _____
- ☐ Shirt _____
- ☐ Camera w/ bag _____
- ☐ Knife _____
- ☐ Hat _____
- ☐ GPS _____
- ☐ Compass _____
- ☐ Trekking Poles _____
- ☐ Sunglasses _____
- ☐ _____
- ☐ Trash Bag N/A

(to put clothes in on way home)

Total On Person _____ **oz**

Pack/Shelter/Sleeping

- ☐ Backpack _____
- ☐ Pack Cover _____
- Sleep System**
- ☐ Sleeping Bag _____
- ☐ Stuff Sack _____
- ☐ Sleep Socks _____
- ☐ Sleep Cap _____
- ☐ Insulation Pad _____

Shelter System

- ☐ Shelter _____
- ☐ Shelter Stow Bag _____
- ☐ Shelter Poles _____
- ☐ Stakes _____
- ☐ Stake Stow Bag _____
- ☐ Ground Sheet _____

Total _____ **oz**

Packed Clothing

- ☐ Insulating Top _____
- ☐ Insulating Bottom _____
- ☐ Wick Layer Top _____
- ☐ Wick Layer Bottom _____
- ☐ Jacket _____
- ☐ Raingear Top _____
- ☐ Raingear Bottom _____
- ☐ Gloves _____
- ☐ Spare Socks _____
- ☐ Bandana _____
- ☐ _____
- ☐ _____
- ☐ Stuff Sack _____

Total _____ **oz**

Cooking

- ☐ Stove _____
- ☐ Windscreen _____
- ☐ Fuel Bottles _____
- ☐ Matches/lighter _____
- ☐ Pot _____
- ☐ Lid _____
- ☐ Pot Stand _____
- ☐ Cook Kit Cozy _____
- ☐ Utensils _____
- ☐ Stuff Sack _____
- ☐ Bear Hang Kit _____
- ☐ Food Bag _____

Total _____ **oz**

Water

- ☐ Water Storage _____
- ☐ Water Storage _____
- ☐ Hydration _____
- ☐ Water Treatment _____

Total _____ **oz**

Miscellaneous

- ☐ Trowel _____
- ☐ TP _____
- ☐ Hand Sanitizer _____
- ☐ Small Stuff Sack _____
- ☐ Micro Tripod _____
- ☐ Map _____
- ☐ Flashlight _____
- ☐ Head Net _____
- ☐ Bug Dope _____
- ☐ Sunscreen _____
- ☐ Toothbrush _____
- ☐ Toothpaste _____
- ☐ Whistle _____
- ☐ Fire Starting Kit _____
- ☐ Notepad _____
- ☐ Pencil _____
- ☐ First Aid Kit _____

Total _____ **oz**

Consumables

- ☐ Water _____
- ☐ Food _____
- ☐ Fuel _____
- Total** _____ **oz**

Pack Total _____ **lb**

Skin Out Total _____ **lb**

Menu

Lunch _____

Dinner _____

Breakfast _____

Trip Itinerary (Attach to Copy of Map)

Trip Location: _____ Date/Time Returning _____

Trailhead Parking Location: _____ Destination Parking (if different):) _____

☐ Auto #1: Make _____ Model _____ Color _____ License Plate _____

☐ Auto #2: Make _____ Model _____ Color _____ License Plate _____

Emergency Contact: _____

(Participants and contact info on back)