TRAIL AMBASSADOR

Lead Ambassador Signature: ____

AMBASSADOR LOG

Save time by filing this report on the phone! Call the communications center at 920-783-6728.

			Total Miles:				
ACTIVITY INFORMATION Location of activity:			Communication				
			Center Notified:				
			Assigned ID:				
			AMBASSADOR INFORMATION				
			Lead Ambassador Name	e & ID:			
TYPE(S) OF INCIDENTS				Additional Ambassador Names & IDs:			
nt Type # Encountered							
	- 01/						
AFETY CH	EUK		AMBASSADUR SA	FETY GEAR CHE	jK		
Yes	No	N/A	Item	Yes	No	N/A	
			7. Communication				
	ENTS # En	ENTS # Encount	# Encountered AFETY CHECK	AMBASSADOR AMBASSADOR Lead Ambassador Name # Encountered # Encountered AFETY CHECK AMBASSADOR SA	AMBASSADOR INFORMATION Lead Ambassador Name & ID: AMBASSADOR INFORMATION Lead Ambassador Names & IDs: AGETY CHECK Yes No N/A Item Yes 1. Head Protection 2. Eye Protection 3. Gloves 4. Boots 5. Clothing 6. Navigation	AMBASSADOR INFORMATION Lead Ambassador Name & ID: Additional Ambassador Names & IDs: # Encountered # Encountered AMBASSADOR SAFETY GEAR CHECK AMBASSADOR SAFETY GEAR CHECK Item 1. Head Protection 2. Eye Protection 3. Gloves 4. Boots 5. Clothing 6. Navigation	

LOG DATE / TIME DATA

_____ Date: ____ / ____ / 20____

Date of Activity:

Activity Start Time:
Activity End Time: