

FLOAT PLAN**For Sea Scout Ships and Other BSA Units**

Skippers: If your boat is leaving the vicinity of your home base (dock, yacht club, etc.) so as to be out of sight of another adult leader, you should leave this float plan with a reliable person who can be depended upon to notify the Coast Guard or other rescue organization in case you do not return as scheduled. If you are delayed, and it is not an emergency, inform those with your float plan, the police and/or Coast Guard of your delay in order to avoid an unnecessary search.

SEA SCOUT SHIP IDENTIFICATION

Ship No. _____ Council: _____

Chartered organization: _____

PERSON FILING THIS PLAN

Name: _____ Telephone (including area code): _____

VESSEL IDENTIFICATION

Type: _____ Hull color: _____

Trim color: _____ State registration No.: _____

Length in feet: _____ Vessel name: _____

Make/model/year: _____

CREW AND PASSENGER INFORMATION

The Boy Scouts of America policy requires at least two adult leaders on all trips and tours, and both leaders must be at least 21 years of age. Coed crews must have coed adult leaders.

NAME	AGE	ADDRESS	TELEPHONE

ENGINES

Type: _____ Horsepower: _____ No. of engines: _____ Fuel capacity: _____

SURVIVAL EQUIPMENT (Check as Appropriate)

Life jackets		Flares		Signal mirror		Horn		EPIRB*		Flashlight	
Raft/dinghy		Anchor		Paddles		Food		Water			

*Frequencies: VHF-FM 15/16 _____ 121.5 MHZ _____ 406 MHZ _____

RADIO

YES NO

Type (check as appropriate) Marine VHF SSB CB Cell phone

Frequencies/channels used: _____

Call sign/number: _____

TRIP EXPECTATIONS

(NAVIGATIONAL LIMITS: Inland and coastal waters of the United States of America, the Bahamas, Mexico, and Canada not exceeding 100 miles offshore. Approval from the local Council must be received, and additional insurance must be purchased for any exceptions.)

Leaving from: _____

Going to: _____

Leaving (date): _____ Leaving (time): _____

Return by (date): _____ Return by (time): _____

But no later than (date): _____ But no later than (time) _____

AUTOMOBILE

Make/model/year: _____ Color: _____

State/license No.: _____ Trailer state/license No: _____

Where parked: _____

IF NOT RETURNED BY

Date: _____ Time: _____

CALL

Coast Guard at (telephone) _____

Or local authority (name and telephone) _____

OTHER PERTINENT INFORMATION