

SIERRA CLUB MOUNTAINEERING/ROCK CLIMBING PROGRAM

Outing Name: _____ Date: _____

Leader(s): _____

Sponsoring Chapter/Group/Subcommittee: _____

Please sign in below, giving the name and telephone number of a person to contact in emergencies. By signing in you agree to:
 Cooperate with the leaders and recognize their authority to modify or terminate the outing for reasons of safety.
 Help keep the group together and stay within sight of others, particularly if visibility is poor.
 Remain with the group and render assistance in case of accident or emergency, until excused by the

No.	Name	Address	Emergency Phone	Car Lic#	Membership #	Sign In	Sign Out
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No.	Name	Address	Emergency Phone	Car Lic#	Membership #	Sign In	Sign Out
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