White Mountain National Forest
Summary of Use

Name of AMC Chapter:

Trip Leader Name(s):

Contact Number or Email Address:

Please complete the chart below indicating your use of the White Mountain National Forest. Please return within 2 weeks of completing your trip. Please be specific when listing the location, list all trails and/or shelters used. We track use on the Forest by the type and the trails and/or shelters used so it is important to be specific.

Please circle (or underline) the type of use(s) for your trip:
summer hiking  mtn biking  rock climbing  boating  fishing  hunting  mountaineering
winter hiking  x-c skiing  snowshoeing  snowmobiling  alpine skiing  ice climbing
dog sledding  avalanche course or training  other____________________________

Please note:
# People: Fill in the number of participants - do not count trip leaders (you specified those above).
# Days: Any half-days count as full days.

<table>
<thead>
<tr>
<th>Date(s) of Trip</th>
<th>Location(s) (List the specific trail &amp;/or shelter used)</th>
<th># People</th>
<th># Days</th>
<th>Total Service Days (# people X # days)</th>
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Please e-mail this form to jburnett@fs.fed.us

Alternatively, you can mail the form itself to

White Mountain National Forest Headquarters
Jenny Burnett
71 White Mountain Drive
Campton, NH 03223