## 2019 Reported Heliskiing Activity

Bi-weekly Period:	from	to
Di-Weekiy i cilou.	110111	ιO

Company N	ame:

**Person Completing Report:** 

Date	Start Time	End Time	Heli ID #	Skier Days Used (do not count training/guide school days)	Area(s) / Flight Path(s)	Deviation from the flight guidelines? (provide explanation below*)	Accidents? (provide explanation below*)	Incidental Wildlife Observation? (provide explanation below inc. type of wildlife & location*)	
* Explanati	ionsf	l Ilight devia	itions, acc	idents. inci	dental wildlife observations, if an	V			
Date		J 0.0 . 10		,	,,,,,				
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