## **Reported Heliskiing Activity**

Bi-weekly Period:	from	to

**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*)
		<u> </u>						
* Explanat	ionsf	light devia	tions, acc	idents, inci	dental wildlife observations, if an	ıy		
Date								