



# YOU'VE GOT GEAR... NOW WHAT?



## COURSE WORKBOOK

Turn Scattered Gear  
Into a Complete,  
Written System



A Complete Step-by-Step Guide

### BRANDING AREA

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YOU'VE GOT GEAR... NOW WHAT?

COURSE WORKBOOK

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Turn Scattered Gear Into a Complete, Written System

A Free Resource from: [Your Name / Brand]

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## INTRO

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## HOW TO USE THIS WORKBOOK

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This workbook is designed to be printed or used digitally as you go through the course:

"You've Got Gear... Now What? Turn Your Stuff Into a Real Preparedness System."

- Use it as a working document.
- Write in it. Cross things out. Make it yours.
- Keep it with your printed plans once completed.

## RECOMMENDED USE:

- Print it or open it in Word/Google Docs.
- Complete the exercises as you watch the lessons.
- Revisit your answers every 3–6 months and update.

YOUR STARTING POINT

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Today's Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Where are you doing this from? (Apartment / Suburban home / Rural / Off-grid, etc.)

\_\_\_\_\_

Who is in your household?

Adults (names & ages): \_\_\_\_\_

\_\_\_\_\_

Children (names & ages): \_\_\_\_\_

\_\_\_\_\_

Pets (type & number): \_\_\_\_\_

\_\_\_\_\_

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MODULE 1 – ORIENTATION: FROM GEAR OWNER TO SYSTEM BUILDER

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EXERCISE 1.1 – WHY YOU’RE HERE

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In your own words, why are you taking this course?

What’s driving you to get more organized and prepared?

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What are you MOST worried about? (Be specific.)

Examples: storms, grid downs, layoffs, unrest, supply chain issues, etc.

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What do you MOST want from this course?

- Less anxiety
- Clear written plans
- Confidence my family knows what to do
- Better use of the gear I already have
- Other: \_\_\_\_\_

## EXERCISE 1.2 – SNAPSHOT SELF-ASSESSMENT

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Rate yourself 1–5 in each area:

1 = Nothing / almost nothing

2 = Minimal

3 = Decent start

4 = Solid

5 = Confident & tested

Circle or mark one number for each.

WATER

[1][2][3][4][5]

FOOD

[1][2][3][4][5]

MEDICAL & HYGIENE

[1][2][3][4][5]

SECURITY & HOME SAFETY

[1][2][3][4][5]

COMMUNICATION (COMMS)

[1][2][3][4][5]

Summary of your snapshot (what stands out?):

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EXERCISE 1.3 – YOUR BIGGEST GAP

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Looking at your scores, what is your LOWEST area?

- Water
- Food
- Medical & Hygiene
- Security & Home Safety
- Communication (Comms)

Describe your biggest gap in one honest sentence:

“My biggest gap right now is...”

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If you did NOTHING else in this course but fix this one gap, what would that look like?

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#### EXERCISE 1.4 – TIME & ACCOUNTABILITY PLAN

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How many hours per week can you realistically commit to this course?

- 1 hour     2 hours  
 3–4 hours     Other: \_\_\_\_\_

Which days/times will you dedicate? (Be specific.)

Example: “Saturdays 9–11 AM” or “Mon/Wed nights after 8 PM”

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Who (if anyone) can be your accountability partner?

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

How will you stay accountable?

- Text check-ins
- Weekly call
- Share finished worksheets
- Other: \_\_\_\_\_

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## MODULE 2 – THE GREAT GEAR AUDIT

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### EXERCISE 2.1 – GEAR CATEGORIES OVERVIEW

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Check which categories you KNOW you have gear in:

- Water (storage, filters, purification)
- Food (pantry, long-term storage)
- Cooking (stoves, fuel, cookware)
- Power (batteries, solar, generators, power banks)
- Medical (first aid, trauma)
- Hygiene (soap, TP, feminine products, diapers, etc.)
- Security (locks, lights, alarms, defensive tools)
- Communication (radios, chargers, emergency alerts)
- Shelter (tents, tarps, sleeping bags, blankets)
- Tools (multi-tools, hand tools, repair kits)

Clothing (seasonal, work gloves, boots, rain gear)

Documents (IDs, insurance, cash, copies)

Anything else you know you have?

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### EXERCISE 2.2 – DETAILED GEAR INVENTORY SHEETS

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Use one sheet per category. Copy/paste or print more as needed.

CATEGORY: \_\_\_\_\_

Location(s) (be specific – room/shelf/bin):

---

| ITEM / DESCRIPTION | QTY | CONDITION (New/OK/Replace) | NOTES |

|-----|----|-----|-----|

| | | |

| | | |

| | | |

| | | |

| | | |

Most important items in this category:

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Items that are missing / need replacing:

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### EXERCISE 2.3 – GEAR LOCATION MAP

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Write down WHERE your main gear and supplies live.

Example: “Garage – metal shelf; Hall closet – top shelf; Bedroom – under bed bins”

Main Storage Areas:

1) \_\_\_\_\_

What's here? \_\_\_\_\_

2) \_\_\_\_\_

What's here? \_\_\_\_\_

3) \_\_\_\_\_

What's here? \_\_\_\_\_

4) \_\_\_\_\_

What's here? \_\_\_\_\_

If you had to find your most important items in the dark, how confident are you?

[ 1 ] Not at all [ 2 ] A little [ 3 ] Somewhat [ 4 ] Pretty confident [ 5 ] 100% confident

#### EXERCISE 2.4 – GAPS & PRIORITIES LIST

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Based on your inventory, list your TOP REAL GAPS (not just “nice to have” items).

GAPS:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

5) \_\_\_\_\_

Now, prioritize the NEXT 3 ACTIONS you will take:

PRIORITY ACTION #1:

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Target date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

PRIORITY ACTION #2:

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Target date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

PRIORITY ACTION #3:

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Target date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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### MODULE 3 – HOME BASE (BUG-IN) PLAN

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#### EXERCISE 3.1 – LIKELY SCENARIOS TO BUG-IN

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List 3–5 scenarios where your best move is to STAY HOME.

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_

For each, how long might you need to shelter at home?

1) \_\_\_\_\_ days/weeks

2) \_\_\_\_\_ days/weeks

3) \_\_\_\_\_ days/weeks

4) \_\_\_\_\_ days/weeks

5) \_\_\_\_\_ days/weeks

### EXERCISE 3.2 – 72-HOUR HOME BASE PLAN

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If the power went out RIGHT NOW and stayed off for 72 hours:

#### WATER:

- How much do you have on hand? \_\_\_\_\_ gallons

- Where is it stored? \_\_\_\_\_

#### FOOD:

- What could you feed your household for 3 days? (List some items.)

\_\_\_\_\_

\_\_\_\_\_

#### COOKING:

- Off-grid cooking method(s) you have:

- Gas/propane stove    Grill    Camp stove  
 Rocket stove    Other: \_\_\_\_\_

**LIGHT:**

- What would you use for light?

- Flashlights    Lanterns    Candles    Headlamps

Where are they? \_\_\_\_\_

**SANITATION:**

- How would you handle trash, toilets, basic hygiene?

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**EXERCISE 3.3 – 30-DAY HOME BASE PLAN**

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Goal: Sustain your household at home for up to 30 days.

**FOOD PLAN:**

Approx. days of food you \*currently\* have: \_\_\_\_\_ days

Goal: \_\_\_\_\_ days by \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Key foods to stock / improve:

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**WATER PLAN:**

Current water storage: \_\_\_\_\_ gallons

Target water capacity or plan (stored + source + filter):

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**MEDS & HYGIENE:**

Are you able to cover 30 days for:

Prescription meds    Over-the-counter meds

Soap & hygiene    Feminine products

Diapers / baby needs    Pet needs

Gaps to fix:

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**EXERCISE 3.4 – ROLES & RESPONSIBILITIES**

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List each household member and assign basic responsibilities during a bug-in.

Example roles: water duty, cooking, security checks, pet care, comms, child care.

Name: \_\_\_\_\_

Roles: \_\_\_\_\_

\_\_\_\_\_

Name: \_\_\_\_\_

Roles: \_\_\_\_\_

\_\_\_\_\_

Name: \_\_\_\_\_

Roles: \_\_\_\_\_

\_\_\_\_\_

Notes about family briefing (what do they need to know?):

\_\_\_\_\_

\_\_\_\_\_

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## MODULE 4 – EVAC / BUG-OUT PLAN

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### EXERCISE 4.1 – TRIGGERS FOR LEAVING

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List 3–5 clear triggers where you will LEAVE your home.

Examples: mandatory wildfire evacuation, rising floodwater reaching X point, confirmed chemical spill, etc.

1) If \_\_\_\_\_

Then we leave. (Y/N): [ ]

2) If \_\_\_\_\_

Then we leave. (Y/N): [ ]

3) If \_\_\_\_\_

Then we leave. (Y/N): [ ]

4) If \_\_\_\_\_

Then we leave. (Y/N): [ ]

5) If \_\_\_\_\_

Then we leave. (Y/N): [ ]

#### EXERCISE 4.2 – DESTINATIONS & CONTACTS

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PRIMARY DESTINATION:

Address: \_\_\_\_\_

Name/Contact: \_\_\_\_\_

Phone(s): \_\_\_\_\_

**SECONDARY DESTINATION:**

Address: \_\_\_\_\_

Name/Contact: \_\_\_\_\_

Phone(s): \_\_\_\_\_

**TERTIARY / LAST RESORT DESTINATION:**

Address/General Area: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

**EXERCISE 4.3 – ROUTES & MAPS**

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For each destination, identify at least 2 routes.

**PRIMARY DESTINATION:**

Route A (main):

- Roads/highways: \_\_\_\_\_

- Est. time: \_\_\_\_\_

- Hazards to consider: \_\_\_\_\_

Route B (alternate):

- Roads/highways: \_\_\_\_\_

- Est. time: \_\_\_\_\_

- Hazards to consider: \_\_\_\_\_

Maps:

I have printed maps with routes marked.

Where are they stored? \_\_\_\_\_

#### EXERCISE 4.4 – BUG-OUT BAG & VEHICLE CHECKLIST

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FOR EACH ADULT:

Bug-out bag packed and accessible

Approx. 72 hours of essentials

Tested for carry comfort (I've worn it with weight)

List contents at a high level:

- Water & filter: \_\_\_\_\_

- Food/snacks: \_\_\_\_\_

- Clothing: \_\_\_\_\_

- Shelter/warmth: \_\_\_\_\_

- Medical: \_\_\_\_\_

- Tools: \_\_\_\_\_

- Documents/cash: \_\_\_\_\_

VEHICLE:

- Usually kept at least 1/2 tank of fuel
- Basic vehicle kit (jumper cables, tools, etc.)
- Extra water: \_\_\_\_\_
- Extra food: \_\_\_\_\_
- Maps in glove box

Gaps to address for bug-out readiness:

\_\_\_\_\_

\_\_\_\_\_

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MODULE 5 – COMMUNICATION PLAN

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EXERCISE 5.1 – EMERGENCY CONTACT LIST

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List key contacts. Make at least two copies: one for home, one for your wallet/BOB.

OUT-OF-AREA CONTACT (Primary):

Name: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Email: \_\_\_\_\_

LOCAL CONTACTS:

Name: \_\_\_\_\_ Role: Neighbor / Friend / Family

Phone(s): \_\_\_\_\_

Name: \_\_\_\_\_ Role: Neighbor / Friend / Family

Phone(s): \_\_\_\_\_

IMPORTANT NUMBERS:

Local Police (non-emergency): \_\_\_\_\_

Fire Department: \_\_\_\_\_

Doctor / Clinic: \_\_\_\_\_

Pediatrician: \_\_\_\_\_

Vet: \_\_\_\_\_

Work/School Contacts: \_\_\_\_\_

\_\_\_\_\_

EXERCISE 5.2 – DEVICES & BACKUP POWER

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PHONES / DEVICES:

Who has a phone?

Name: \_\_\_\_\_ Phone type: \_\_\_\_\_

Backup power option?  Yes  No

Name: \_\_\_\_\_ Phone type: \_\_\_\_\_

Backup power option?  Yes  No

BACKUP POWER:

Power bank(s) – Qty: \_\_\_\_\_ Stored where? \_\_\_\_\_

Car chargers – Vehicles covered: \_\_\_\_\_

Solar chargers / panels: \_\_\_\_\_

Generator / other: \_\_\_\_\_

RADIOS / OTHER COMMS:

FRS/GMRS radios

Ham radio

NOAA weather radio

Other: \_\_\_\_\_

Notes on how to use them (frequencies, channels, etc.):

\_\_\_\_\_

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EXERCISE 5.3 – FAMILY COMMS PLAN & RALLY POINTS

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RALLY POINTS:

NEARBY MEETUP (e.g., local landmark):

Location: \_\_\_\_\_

When to use: \_\_\_\_\_

OUT-OF-AREA MEETUP:

Location: \_\_\_\_\_

When to use: \_\_\_\_\_

CHECK-IN SCHEDULE (if separated or comms down):

Example: “Try to check in at 12:00 and 18:00 each day.”

Our check-in times: \_\_\_\_\_

Simple code words or phrases your family will understand:

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Have you briefed your family on this plan?

Yes  No (schedule a briefing by: \_\_\_\_ / \_\_\_\_ / \_\_\_\_)

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MODULE 6 – LOGISTICS, MAINTENANCE & DRILLS

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EXERCISE 6.1 – FOOD & WATER ROTATION LOG

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FOOD ROTATION LOG:

Item / Category: \_\_\_\_\_

Location: \_\_\_\_\_

Check Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Notes (expiring soon, move to front, etc.):

\_\_\_\_\_

[Copy and reuse this block for multiple items.]

WATER ROTATION LOG:

Stored water amount: \_\_\_\_\_ gallons

Storage method (bottles, barrels, etc.): \_\_\_\_\_

Last changed/checked: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Next change/check date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Notes:

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## EXERCISE 6.2 – SEASONAL REVIEW CHECKLIST

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Do this 4x per year (Spring, Summer, Fall, Winter).

SEASON: \_\_\_\_\_ YEAR: \_\_\_\_\_

- Check food expiration dates
- Check water storage
- Check batteries / replace as needed
- Adjust clothing & gear for current season
- Review home base plan
- Review bug-out plan & routes
- Confirm contact info is current
- Test critical gear (stove, radios, etc.)

Notes from this seasonal review:

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EXERCISE 6.3 – DRILLS & PRACTICE LOG

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DRILL: BLACKOUT NIGHT

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Duration: \_\_\_\_\_ hours

What did you learn?

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DRILL: NO-TAP-WATER DAY

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Duration: \_\_\_\_\_ hours

What did you learn?

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DRILL: BUG-OUT PRACTICE (PACK & LOAD)

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Duration: \_\_\_\_\_ hours

What did you learn?

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Other drills:

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### BONUS – 30-DAY IMPLEMENTATION ROADMAP

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### EXERCISE B.1 – 30-DAY ACTION CHECKLIST

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Use this to break the course into simple daily/weekly tasks.

#### WEEK 1:

- Watch Module 1
- Complete Snapshot Self-Assessment
- Block time on calendar
- Start Gear Audit (water, food)

#### WEEK 2:

- Finish Gear Audit
- Complete Gear Location Map
- List top 3 gaps and set target dates

#### WEEK 3:

- Build 72-hour home base plan
- Build 30-day home base plan
- Assign household roles

#### WEEK 4:

- Define evac triggers
- Choose destinations & routes
- Review bug-out bags & vehicle kit

#### WEEK 5:

- Build comms contact list
- Confirm backup power & radios
- Define rally points & check-in times

#### WEEK 6:

- Set up rotation log
- Plan seasonal reviews
- Schedule next 2 drills

Add or edit tasks to fit your situation:

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EXERCISE B.2 – 90-DAY UPGRADE PLAN

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Over the next 90 days, my TOP 5 PREPAREDNESS UPGRADES will be:

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_

Target completion date for all 5: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Reward for completing them (optional but recommended!):

\_\_\_\_\_

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APPENDIX – PREPAREDNESS SYSTEM OVERVIEW (QUICK REFERENCE)

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Use this page as a 1-page dashboard once your system is built.

WATER:

- Stored: \_\_\_\_\_ gallons

- Filters/purification: \_\_\_\_\_

FOOD:

- Approx. days of food on hand: \_\_\_\_\_

- Main storage locations: \_\_\_\_\_

MEDICAL:

- First aid kit location(s): \_\_\_\_\_

- Special meds considerations: \_\_\_\_\_

HOME BASE:

- 72-hour plan: DONE / NOT DONE

- 30-day plan: DONE / NOT DONE

EVAC PLAN:

- Primary destination: \_\_\_\_\_

- Secondary destination: \_\_\_\_\_

- Routes: \_\_\_\_\_

COMMS:

- Out-of-area contact: \_\_\_\_\_

- Rally points: \_\_\_\_\_

MAINTENANCE:

- Next seasonal review: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

- Next scheduled drill: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

End of Workbook4