

# CAMP ROSTER

**UNIT LEADER:** \_\_\_\_\_ **UNIT:** \_\_\_\_\_ **DISTRICT:** \_\_\_\_\_

**CAMP:** \_\_\_\_\_ **CAMPSITE:** \_\_\_\_\_ **SESSION:** \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

Adult Leaders	Date in Camp	Emergency Contact	Emergency Phone

Youth Names	Rank	Age	Emergency Contact	Emergency Phone
SPL				

*SPL – Senior Patrol Leader (Troops only)*

**BRING 3 COPIES OF THIS FORM TO CAMP WITH YOU**