

CAMPMASTER'S TROOP ROSTER

PLEASE FILL OUT AND GIVE TO CAMPMASTER UPON ARRIVAL

Please note: Two (2) adult leaders must be present before you can be checked into your assigned area.

Unit # _____ Town _____ Campsite _____
(Pack/Troop/Post)

Youth's Names:

Adult's Names:

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SIGNATURE OF LEADER IN CHARGE:

SIGNATURE OF SPL/YOUTH LEADER:

Program Schedule provided
Additional names may be written on reverse side