



Summer Camp Troop Attendance Roster

Troop # _____ Council _____

Week Attending 1 2 3 Campsite _____

Unit Contact _____ Home Phone (____) _____ - _____

Address _____ Alt. Phone (____) _____ - _____

City _____ State _____ Zip _____

Choose Dining Option: (Circle One) Dining Hall Patrol Cooking

Check-In Time: 1st Choice _____ 2nd Choice _____ 3rd Choice _____

Part I - Adult Leader Roster (Please Print)			Days in Camp					
No.	Adult Name	Telephone	Sun.	Mon.	Tues.	Wed.	Thur.	Fri.
1								
2								
3								
4								
5								
6								

Part II - Youth Roster (Please Print)					
No.	Youth Name	Rank	No.	Youth Name	Rank
1			13		
2			14		
3			15		
4			16		
5			17		
6			18		
7			19		
8			20		
9			21		
10			22		
11			23		
12			24		

Check in Times to choose from are: 1:00pm, 1:15pm, 1:30pm, 1:45pm, 2:00pm, 2:15pm, 2:30pm, 2:45pm, and 3:00pm. You will be sent a confirmation with your check in time once your final payments are made. Units who miss their assigned check in time will check in after the last scheduled unit arrives. A copy of this roster **MUST** be submitted with your down payment, final payment, and upon arrival at camp. Be sure to complete this form in its entirety.