

NOTE: Rosters must be filled out and turned in prior to any participant's arrival.

Activity description: _____

Unit #: _____ Campsite and Facilities #: _____ Date: _____

	Participant Name (alphabetically last name first, first name last)	(Check If) Adult	(Check If) Youth	(Check If) Non-Registered
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
33				
34				
35				
36				
37				
38				
39				
40				

(Use and attach additional sheets as may be necessary)

Leader #1 Name (Youth Protection Trained)

Training Date

Leader #2 Name (Youth Protection Trained)

Training Date

BALOO Trained Adult Name (Cub Scouts Only)

Training Date