

WEEKEND CAMPING UNIT ROSTER

<u>Note</u>: All attendees must fill-out this Weekend Camping Unit Roster for day and overnight events. The roster should be turned in to the Ranger or Campmaster at check-in before proceeding into camp.

Camp: (please $\sqrt{}$ one) \square Alpine \square Pouch \square Ten Mile River **Weekend dates**: ______ **Site**: ____

Unit T	pe: Unit #: Council:		Council:			District: _			
[]	Cub Scout unit	s must indicate wh	ich leader(s)	is BALOO t	rained, plea	ase check bo	x next to lea	ader's name.	
[]	Camp Leader Inf	ormation:							
	•	me Street Address, Apt #							
	City		Zip		Cell			Email	
[]	Asst. Camp Lead								
	Full		Full Nan	ime			Street Address, Apt #		
	City		Zip		Cell			Email	
		Step 1			S	Step 2 (Check ONE) Ste			Step 3
No.	(Print)	Participants Full Name		BSA Registered Youth	Non BSA Registered Sibling	"Intent to Join" Youth Youth that is not registered but contemplating joining	BSA Registered Adult	Non BSA Registered Adult Parent/ Guardian	Adult Scouter Position or Youth Grade
1						,, ,			
2									
3									
4									
5									
6									
		ts or Scouts on an ac							

listed on this roster will be in attendance all weekend unless otherwise noted. I have been given a copy of the camp rules and regulations and I will inform all Scouts and adults of these rules and enforce them while in camp.

Swimming and Boating Policy: All swimming and boating areas are closed. Scouts must be supervised by an adult leader when fishing, or in any activities involving any waterfront. Waterfront areas (swimming and boating) will only be open for approved Council run activities, under the supervision of approved Council staff.

Camp Leaders signature Date

	Step 1		Step 3				
No.	(Print) Participants Full Name	BSA Registered Youth	Non BSA Registered Sibling	ep 2 (Check ON "Intent to Join" Youth Youth that is not registered but contemplating joining	BSA Registered Adult	Non BSA Registered Adult Parent/ Guardian	Adult Scouter Position or Youth Grade
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