

Scout Expo 2026 "Americas 250th Anniversary" Unit Roster

TO BE COMPLETED BY LEADER WITH ITEMS **SUBMITTED AT SUB-CAMP CHECK-IN

Pack/Troop/Crew/Post/Ship # _____ District _____

On Site Leader: _____ Unit Leader: _____

ADULT ROSTER				
#	Adult's Name	Emergency Phone	**Consent/Hold Harmless	Medical
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

YOUTH ROSTER				
#	Youth Name	**Consent/Hold Harmless	Shooting Sports Form	Medical
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
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19				
20				