2019 GOOSE CREEK DISTRICT SPRING CAMPOREE

Unit Adult Roster Form

NOTE: Each Unit must complete this form and email it to scouterchalis@gmail.com *before March 22nd.*

Please check one: □ Initial Submission □ Revised Submission – date: _____

Unit Type & Number: _____ Adult Advisor Name: _____

Please mark each area that applies to each Adult. Please print clearly

(**B**) Mt Bike Hike (**M**) Mt Board (**R**) Rock Wall (**Z**) Zipline (**T**) Team Build Comp (**H**) High Ropes

	Last Name	First Name	Position	B	M	R	Z	T	H
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