



CAMPING UNIT ROSTER

Dates: _____ Site: _____

Unit Type: _____ Unit #: _____ Council: _____ District: _____

Leader: _____ Cell: _____ Email: _____

Asst. Leader: _____ Cell: _____ Email: _____

Step 1		Step 2					Step 3		Step 4			
No.	Last Name	First Name	BSA Registered Youth	Non BSA Registered Youth	BSA Registered Adult	Non BSA Registered Adult <i>Parent / Guardian</i>	Current YPT?	Adult Position or Youth Grade	Food Allergies / Dietary Needs	Emergency Contact Name	Emergency Contact Phone	If you are a parent, please indicate the line #(s) associated with your child(ren)
1												
2												
3												
4												
5												
6												
7												

Please list additional adults or Scouts on the additional sheet provided, making as many copies as you need. This roster **must** be completed at check-in or before entering camp. All adults 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.

Camp Leader's Signature

Date

