

Camping Unit Roster

Dates: _____ Site: _____

Unit Type: _____ Unit #: _____ Council: _____

District: _____

Leader: _____ Cell: _____ Email: _____

Assistant: _____ Cell: _____ Email: _____

Step 1		Step 2				Step 3		Step 4				
No.	Last Name	First Name	Scouting America Registered Youth	Non-Scouting America Registered Youth	Scouting America Registered Adult	Non-Scouting America Registered Adult Parent / Guardian	Current YPT?	Adult Position or Youth Grade	Food Allergies / Dietary Needs	Emergency Contact Name	Emergency Contact Phone	Parents, 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 _____

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	Step 1		Step 2				Step 3		Step 4			
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