

Short Term Camp Roster

DATE: ____/____/____

Beaumont Firelands Stigwandish
(Circle one)

CAMPSITE/CABIN: _____

EVENT _____

ADULT LEADER'S NAME _____ CELL # (____) ____ - ____

ADULT LEADER'S NAME _____ CELL # (____) ____ - ____

Unit # ____ - ____ - ____ - ____

Crew Pack Troop Ship
(Circle One)

Area/District: _____

Council: _____

ADULTS:

1. _____
2. _____
3. _____
4. _____
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20. _____

SCOUTS:

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