



2022 CAMP ROSTER

Your pack or troop needs to complete this roster to turn in on arrival at camp.

Date Attending _____
Troop or Pack # _____
Council _____

Camp _____
Campsite _____
District _____

Fillable version available at www.cpcbsa.org/tools/camping-forms/ .
Any mid-session leadership changes should be noted on this form.

OVERNIGHT ADULTS IN CAMP

NIGHTS IN CAMP
(Mark with an X in box)

Name	Phone Number	S	M	T	W	Th	F	S

YOUTH

Den/Patrol Name: _____

Name	Age	Phone
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Den/Patrol Name: _____

Name	Age	Phone
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Den/Patrol Name: _____

Name	Age	Phone
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Drivers ONLY (not staying at camp)

Name	Phone
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

