

CAMP VEHICLES

Troop #: _____ Leader: _____

----- Vehicle 1 -----

Driver: _____

License #: _____ Color: _____ Make: _____

Approximate Arrival Time: _____

----- Vehicle 2 -----

Driver: _____

License #: _____ Color: _____ Make: _____

Approximate Arrival Time: _____

----- Vehicle 3 -----

Driver: _____

License #: _____ Color: _____ Make: _____

Approximate Arrival Time: _____

----- Vehicle 4 -----

Driver: _____

License #: _____ Color: _____ Make: _____

Approximate Arrival Time: _____

----- Vehicle 5 -----

Driver: _____

License #: _____ Color: _____ Make: _____

Approximate Arrival Time: _____

CAMP ROSTER

Troop #: _____ **Level:** _____ **Leader:** _____ **Unit Assignment:** _____

Actual Attendance: Girls: _____ Adults: _____ / _____ (female/male) Tags: _____ / _____ (female/male) Total Attendees: _____

Name	Child/ Adult	Female/ Male	Grade (if Child)	Check if Attended	Emergency Contact/Relationship to Participant/Phone Numbers
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					