TROOP ROSTER

Please print or type

Troop	District or C	Community	Campsite		
Week	Council Name		nmunityCampsite		
TOTALS:					
FULL TIME	ADULTS:		REMINDER: Please try to have one		
PART TIME	ADULTS		copy of this roster ready to turn in at		
SCOUTS:			the Scoutmaster's meeting at 1:00 p.m.		
			on Sunday.		
ADULT LE	ADERS:				
NAME OF LE		POSITION	DAYS IN CAMP (Please Circle)		
4			Sun Mon Tue Wed Thr Fri		
			Sun Mon Tue Wed Thr Fri		
3			Sun Mon Tue Wed Thr Fri		
4			Sun Mon Tue Wed Thr Fri		
5			Sun Mon Tue Wed Thr Fri		
6			Sun Mon Tue Wed Thr Fri		
-			Sun Mon Tue Wed Thr Fri		
0			Sun Mon Tue Wed Thr Fri		
SPL	Воу	Leaders (Those not	t listed with a patrol)		
3					
3	OL NAME:	7 8 5			
3					
4		8			
•					

	PATROL NAME:		
1		5	
2		6	
3		-	
4		8	
	PATROL NAME:		
1		5	
2		6	
3		7	
4		8	
	PATROL NAME:		
1		5	
2		6	
3		7	
4		0	
	PATROL NAME:		
1		5	
2		6	
3		7	
4		8	
	PATROL NAME:		
1		5	
2		6	
3			
4		<u> </u>	