

Cub Scout Resident Camp Roster

Used for Cub Scout Resident Camp, please fill out and turn in upon arrival



BOY SCOUTS OF AMERICA®
CASCADE PACIFIC COUNCIL

Camp Attending _____ Pack # _____ District _____

Reservation # _____ Week in Camp _____ Camp Den Name _____

	Adults in Camp	Phone Number	Nights in Camp					
			S	M	T	W	T	F
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

Please clearly print full names of boys who will be attending camp with your Pack and/or Den. This form is available on our council website at www.cpcbsa.org/download-forms.

Name of Scout	Phone	Grade & Rank	Name of Scout	Phone	Grade & Rank
1			13		
2			14		
3			15		
4			16		
5			17		
6			18		
7			19		
8			20		
9			21		
10			22		
11			23		
12			24		

Membership Checked By: _____ Date: _____