

Camp Whitsett Attendance Roster

Complete prior to arrival at Camp, submit to Camp Staff member at Check-In

Troop #: _____ Registration #: _____ Council: _____

	Name	BSA ID	Ethnicity	Med Form	Perm Slip	Youth Protection Training	Type		Program	Arrival		Departure	
							Y	A		Sunday	Other	Saturday	Other
EX	Joe Scoutmaster	123456789	W	✓	✓	✓	Y	A	T	✓			Friday
1							Y	A					
2							Y	A					
3							Y	A					
4							Y	A					
5							Y	A					
6							Y	A					
7							Y	A					
8							Y	A					
9							Y	A					
10							Y	A					
11							Y	A					
12							Y	A					
13							Y	A					
14							Y	A					
15							Y	A					
16							Y	A					
17							Y	A					
18							Y	A					
19							Y	A					
20							Y	A					

Check-In Staff Name:			Office Use Only				Check-In Time:			
Campsite			Insurance:	Y	N	Camp Total				
Tent Total	Wild Total	Assignment	Balance Due:			Y	A	SE	Total	
			Paid:							

Ethnicity: W-White B-Black NA-Native American HS-Hispanic AP-Asian/Pacific Islander O-Other

Program: T-Traditional Merit Badge CPT-CPT ITB-Intro to Backcountry FKJ-Forks Kern to Jerky BRW-Black Rock to Whitney HP-Horse