



CAMP SHENANDOAH Troop Roster

Troop Number: _____ Week # _____ Home Council: _____

Leader in Camp

Name

Phone Number

Position

Email

Days in Camp

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

	Name of Scout/Leader	Y = Youth A = Adult	Area Code & Phone #	Rank or Position	Med Form Check
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					

Name of Scout/Leader	Y = Youth A = Adult	Area Code & Phone #	Rank or Position	Med Form Check
16.				
17.				
18.				
19.				
20.				
21.				
22.				
23.				
24.				
25.				
26.				
27.				
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35.				
36.				