



# TFC Summer Day Camp Adult Roster

Name of Camp (by location): \_\_\_\_\_ Camp Dates: \_\_\_\_\_

Pack #: \_\_\_\_\_ Your District: \_\_\_\_\_

Pack Camp Contact: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

#	Adult Name	Cell Phone #	Days Attending (Circle all that apply)
1			Mon Tu Wed Th Fri Sat Sun ALL
2			Mon Tu Wed Th Fri Sat Sun ALL
3			Mon Tu Wed Th Fri Sat Sun ALL
4			Mon Tu Wed Th Fri Sat Sun ALL
5			Mon Tu Wed Th Fri Sat Sun ALL
6			Mon Tu Wed Th Fri Sat Sun ALL
7			Mon Tu Wed Th Fri Sat Sun ALL
8			Mon Tu Wed Th Fri Sat Sun ALL
9			Mon Tu Wed Th Fri Sat Sun ALL
10			Mon Tu Wed Th Fri Sat Sun ALL
11			Mon Tu Wed Th Fri Sat Sun ALL
12			Mon Tu Wed Th Fri Sat Sun ALL
13			Mon Tu Wed Th Fri Sat Sun ALL
14			Mon Tu Wed Th Fri Sat Sun ALL
15			Mon Tu Wed Th Fri Sat Sun ALL

Use additional rosters as needed.