Day Camp 2004 – Adult Volunteer Roster or _____

Pack	#
I GUN	π

Pack	Coordinate	2
Email	Address	

Phone # (

Session
AM (8:00 - 1:30)

□ PM (2:30 - 8:00)

Adult Coverage	1 to 4 Ratio	each session	? 🗌 Yes 🗌 No
----------------	--------------	--------------	--------------

Camp Location: O'Neill Park Camp Date: June 21-25, 2004

Office Use Only	Adult Volunteer	Phone #	Days Volunteering					Extra Shirt
								\$
	1		М	Т	W	Т	F	
	2		М	Т	W	Т	F	
	3		М	Т	W	Т	F	
	4		М	Т	W	Т	F	
	5		М	Т	W	Т	F	
	6		М	Т	W	Т	F	
	7		М	Т	W	Т	F	
	8		М	Т	W	Т	F	
	9		М	Т	W	Т	F	
	10		М	Т	W	Т	F	
	11		М	Т	W	Т	F	
	12		М	Т	W	Т	F	
	13		М	Т	W	Т	F	
	14		М	Т	W	Т	F	
	15		М	Т	W	Т	F	
	16		М	Т	W	Т	F	
	17		М	Т	W	Т	F	
	18		М	Т	W	Т	F	
	19		М	Т	W	Т	F	
	20		М	Т	W	Т	F	
Each Pack M	UST provide one adult for every four campers attending camp every sess	ion every day. Date Received		/	Amount	Receiv	ed	

adult coverage to do this. Orange County Council BSA offers the finest 100% Volunteer Day Camp in the country Thanks to you.

Date Paid IN FULL _____ Balance Due _