

Day Camp 2003 – Webelos Scout Roster

Pack # _____

Pack Coordinator _____ Phone # () _____

Session 7C - AM (8:00 - 1:30)

Email Address _____

7D - PM (2:30 - 8:00)

Adult Coverage 1 to 4 Ratio each session? Yes No Founder's Unit: Yes No

Camp Date: 6/23 - 27/2003 Camp Location: O'Neill Park

Office Use	Camper's Name	Phone #	Rank Fall 2003		Adult Volunteer	Fee	Shirts	Deposit	Balance Due	Balance Paid	Date Paid
1			W1	W2		\$					
2			W1	W2		\$					
3			W1	W2		\$					
4			W1	W2		\$					
5			W1	W2		\$					
6			W1	W2		\$					
7			W1	W2		\$					
8			W1	W2		\$					
9			W1	W2		\$					
10			W1	W2		\$					
11			W1	W2		\$					
12			W1	W2		\$					
13			W1	W2		\$					
14			W1	W2		\$					
15			W1	W2		\$					
16			W1	W2		\$					
17			W1	W2		\$					
18			W1	W2		\$					
19			W1	W2		\$					
20			W1	W2		\$					

Date Received _____ Amount Received _____

Balance Due _____

Date Paid IN FULL _____