

Scoutmaster _____

Troop # _____

Council _____

Dates attending camp _____

Boy Scout Camp Roster

Camp Phillips

Phillips Scout Reservation "America's Premier Camp"

Arrival Time Please 1:00 p.m._ 2:00 p.m. _ 3:00 p.m. _



BOY SCOUTS OF AMERICA

Name	(A)dult (Y)outh	Address	City, State, Zip	Sex F/M	What Year Camper	For Adults: Days Attending (SMTWTHFS)
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Name	(A)dult (Y)outh	Address	City, State, Zip	Sex F/M	What year Camper	For Adults: Days Attending: (SMTWTHFS)
11						
12						
13						
14						
15						
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