

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

Office Use	Camper's Name	Phone #	Rank Fall 2004		Adult Volunteer	Fee	Extra Shirt \$	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 _____

Date Paid IN FULL _____ Balance Due _____