

2011 Gamehaven Polar Cubs Winter Day Camp

Youth Roster

Day Camp Date: _____

District: HIA WAP SL

Pack # _____

Last Name, First Name		Emergency Contact Name Phone		Rank: (Lion, Tiger, Cub, Webelos) or Sibling	Age	Health Form?	Fee's Paid?
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							

(Use a separate form for each Day Camp)

Adult Roster

Last Name, First Name		Registered Leader + Position or Accompanying Parent?	Emergency Contact + Phone #	Health Form?	Fee's Paid?
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Please bring this roster to camp along with health forms for each participant.