

Pre-Camp Meeting Form

Complete this form and email or fax the form on Friday prior to the Pre-Camp meeting.

Unit Information:

Session:

Unit Number:

Sponsor:

City:

Scoutmaster:

Day Time Phone:

Campmaster:

Day Time Phone:

Contact Email Address:

Cell Phone Contact No. at Camp:

Any Scouts with special needs? Please specify exactly what you need for such Scouts.

Preferred Campsite:

Second Choice of Campsite:

Third Choice of Campsite:

Provide the Number of full time campers you are bringing that will need tents:

Number of Scouts camping

Number of Male Adults Camping

Number of Female Adults Camping

Number of Part Time Leaders: Not included in the above numbers. If one leader is replacing another the two together count as one full time leader.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday		
Males								
Females								

Email or fax this form on Friday prior to the day of your pre-camp meeting to janice.sipes@scouting.org or 816-279-9333