

PACK CUB CAMP COORDINATORS WORKSHEET
MUST BE TURNED IN ON ARRIVAL AT CAMP/FORM TO STAY IN CAMP

PACK # _____ DEN _____ DISTRICT # _____

CUB OR WEBELOS NAME	NO. OF YEARS ATTENDED	LEADERS NAME	PHONE
1. _____			
2. _____			
3. _____			
4. _____			
5. _____			
6. _____			
7. _____			
8. _____			
9. _____			
10. _____			

PACK # _____ DEN _____ DISTRICT # _____

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