



Unit Roster

Unit Type

- Cub Scout Pack
 Crew
 Ship
 Scouts BSA Male
 Scouts BSA Female

UNIT

District

- High Desert
 MT Rubidoux
 Old Baldy
 Sunrise
 Temescal
 Tahquitz
 Other Council _____

Unit Leader (Onsite)	Name	Cell #
Unit Leader (Onsite)	Name	Cell #

SCOUTS

Please DO NOT WRITE IN SHADED AREAS

First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	1	<input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	2	<input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	3	<input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	4	<input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	5	<input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	6	<input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	7	<input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	8	<input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	9	<input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt

UNIT #		[Type here]		[Type here]
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	10 <input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	11 <input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	12 <input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	13 <input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	14 <input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	15 <input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	16 <input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	17 <input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	18 <input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	19 <input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	20 <input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt
First Name	Last Name	<input type="checkbox"/> Cub Lion <input type="checkbox"/> Cub Tiger, Wolf, Bear, WEB,AOL <input type="checkbox"/> Scouts BSA F <input type="checkbox"/> Scouts BSA M <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	21 <input type="checkbox"/> MED AB <input type="checkbox"/> Covid Wav YTH <input type="checkbox"/> Sht Spt

UNIT #

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ADULTS

First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	1	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	2	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	3	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	4	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	5	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	6	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	7	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	8	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	9	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	10	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	11	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	12	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	13	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	14	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT
First Name	Last Name	<input type="checkbox"/> Adult Leader <input type="checkbox"/> Adult	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	15	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav ADLT

UNIT #

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NON-SCOUT YOUTH

First Name	Last Name	<input type="checkbox"/> Non-Scout Youth AGE_____	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	1	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav YTH
First Name	Last Name	<input type="checkbox"/> Non-Scout Youth AGE_____	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	2	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav YTH
First Name	Last Name	<input type="checkbox"/> Non-Scout Youth AGE_____	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	3	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav YTH
First Name	Last Name	<input type="checkbox"/> Non-Scout Youth AGE_____	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	4	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav YTH
First Name	Last Name	<input type="checkbox"/> Non-Scout Youth AGE_____	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	5	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav YTH
First Name	Last Name	<input type="checkbox"/> Non-Scout Youth AGE_____	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	6	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav YTH
First Name	Last Name	<input type="checkbox"/> Non-Scout Youth AGE_____	Camping <input type="checkbox"/> Yes <input type="checkbox"/> No	7	<input type="checkbox"/> MED AB <input type="checkbox"/> Cov Wav YTH

↓ STAFF USE ONLY ↓

CAMPERS	Total Scouts	Total Adults	Total Non-Scout Youth
DAY ONLY	Total Scouts	Total Adults	Total Non-Scout Youth

copy of BSA Guide to Safe Scouting- 1 per unit