



Girl Scouts of Southeastern Michigan

Camp Playfair Troop Camping Roster

Camping Dates: _____

Housing Assignment: _____

Please give this to a Camp Playfair staff member when you check in.

	Name	Girl or Adult	Address	Phone	Email	Grade	Parent/ Guardian
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							

Troop/Group #: _____ Service Unit #: _____ Responsible Adult's Cell #: _____

Leader's Name: _____ Co-Leader's Name: _____