



CHURCH ROSTER

Church Name: _____ Address: _____
 City: _____ State: _____ Zip: _____

PLEASE LIST EVERY PERSON IN YOUR GROUP

Name	Camper	Counselor	Male	Female	Age	Dorm	Motel	Comment
1.								
2.								
3.								
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27.								
28.								
29.								
30.								
FOR CAMP USE ONLY	Total Campers	Total Counselor	Total Males	Total Females	X	Dorm Total	Motel Total	
TOTALS					X			