



PATROL: \_\_\_\_\_

DATE: \_\_\_\_\_

CAMPOUT: \_\_\_\_\_

# CAMPOUT PLANNER

PL	NAME	ATTENDING	PAID	INITIAL
APL				
1				
2				
3				
4				
5				
6				
7				
8				

## SHOPPING LIST

	HAVE	NEED
Paper towels	_____	_____
Aluminum foil	_____	_____
Salt	_____	_____
Matches	_____	_____
Charcoal	_____	_____

## GROCERY LIST

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### Saturday

Breakfast Entrée \_\_\_\_\_

Drink \_\_\_\_\_  
Notes \_\_\_\_\_

Lunch Entrée \_\_\_\_\_

Drink \_\_\_\_\_  
Notes \_\_\_\_\_

Dinner Entrée \_\_\_\_\_

Drink \_\_\_\_\_  
Desert \_\_\_\_\_  
Notes \_\_\_\_\_

### Sunday

Breakfast Entrée \_\_\_\_\_

Drink \_\_\_\_\_

Person buying food: \_\_\_\_\_

Adult signature: \_\_\_\_\_

Person buying food is responsible for the food/ice/cooler for the duration of the campout. Please attach food receipt to this form and return to Senior after the campout.