



2026 Backpack Action Camp Roster

Bring a copy of this form to the registration table. (Use additional forms if necessary)

Church: _____ Outpost #: _____
 Coordinator: _____ Phone #: _____

#	Participant Names	GROUP (ER/Leader)	Name	Phone
1				
2				
3				
4				
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20				

The Pastor has confirmed that adults above have an active, up-to-date background check on file.

 Pastor Signature

 Date