



2026 Outpost FCF Adventure Roster

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

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

#	Boys Names	FCF Young Bucks \$60/\$70	New Candidates \$60/\$70	Buckskin Test \$60/\$70	Attendee Forms	Age Group	Emergency Phone	Emergency Contact Name
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
	Leaders/Adults Names	FCF Old Timers \$60/\$70	New Candidates \$60/\$70	Buckskin Test \$60/\$70	Attendee Forms	Back ground check	Emergency Phone	Emergency Contact Name
1								
2								
3								
4								
5								

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

 Pastor Signature

 Date