PATROL CAMPOUT MENU PLANNER

PATROL: _____

DATE: _____

CAMPOUT: _____

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

SHOPPING LIST

	HAVE	NEED
Paper towels		
Aluminum foil		
Salt		
Matches		
Bleach		

GROCERY LIST

_____

Friday _____

Cracker Barrel _____

Snack _____

Drink _____

Notes _____

Saturday _____

Breakfast Entrée _____

Main Course _____

Side Dish _____

Drink _____

Fruit _____

Notes _____

Lunch Entrée _____

Main Course _____

Side Dish _____

Drink _____

Snack _____

Notes _____

Dinner Entrée _____

Main Course _____

Side Dish _____

Drink _____

Desert _____

Notes _____

Sunday _____

Breakfast Entrée (Cold Food) _____

Main Course _____

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 and return to Senior after the campout.