

**Campout Meal Planner
And
Shopping List**

Patrol: _____

Date: _____

Camp Location: _____

	Name	Attending	Initials
PL	_____	Yes or No	
APL	_____	Yes or No	
1	_____	Yes or No	
2	_____	Yes or No	
3	_____	Yes or No	
4	_____	Yes or No	
5	_____	Yes or No	
6	_____	Yes or No	
7	_____	Yes or No	
8	_____	Yes or No	

Shopping List

Paper towels	Have	Need
Aluminum Foil	Have	Need
Salt/Pepper/Garlic PDR	Have	Need
Sugar/Cinnamon	Have	Need
Mustard/Ketchup/Mayo	Have	Need
Cooking Oil/Butter	Have	Need

QTY Grocery List

Breakfast Day 1

Food _____

 Drink _____

Lunch Day 1

Food _____

 Drink _____

Supper Day 1

Food _____

 Drink _____

Breakfast Day 1

Food _____

 Drink _____

Lunch Day 1

Food _____

 Drink _____

Scout Master Approval
