Backpack Application

Award: _____ Outing Date(s):_____

ROSTER	MENU
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Backpack Hours: _____ Backpack Miles: _____ Backpack Nights: _____ Elevation Gain: _____

Itinerary:

_____

_____

_____

_____

_____

TrailProfile:

_____

_____

_____

_____

_____

Use this form on Awards that require specific information. If available, use your Council's form.
Please use reverse if neccessary

3/19/2012