



Patrol Spirit

Patrol: _____
Date: _____
Location: _____

Attendance: _____

Activity: _____

(complete and turn in to SM or SPL to receive credit for Patrol activities)



Patrol Spirit

Patrol: _____
Date: _____
Location: _____

Attendance: _____

Activity: _____

(complete and turn in to SM or SPL to receive credit for Patrol activities)



Patrol Spirit

Patrol: _____
Date: _____
Location: _____

Attendance: _____

Activity: _____

(complete and turn in to SM or SPL to receive credit for Patrol activities)