

Printable Camping Supply List

Setting Up Camp

- | | | |
|---------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Pillow | <input type="checkbox"/> Tent stakes | <input type="checkbox"/> Sleeping pad |
| <input type="checkbox"/> Tent | <input type="checkbox"/> Sleeping bag | <input type="checkbox"/> Coleman lantern |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

Gear

- | | | |
|---|---|--------------------------------|
| <input type="checkbox"/> Appropriate clothing | <input type="checkbox"/> Hiking boots | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Extra batteries | <input type="checkbox"/> Pocket knife | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Flashlights | <input type="checkbox"/> Rope | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Firewood | <input type="checkbox"/> Waterproof matches | <input type="checkbox"/> _____ |

Food and Meal Preparation

- | | | |
|--|---|---|
| <input type="checkbox"/> Non-perishable snacks | <input type="checkbox"/> Dish soap | <input type="checkbox"/> Sandwich "makings" |
| <input type="checkbox"/> Bottled water | <input type="checkbox"/> Lighter fluid | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Camp Stove | <input type="checkbox"/> Paper towels | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Canteen | <input type="checkbox"/> Plates | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Charcoal | <input type="checkbox"/> Portable grill | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Cups | <input type="checkbox"/> Potholders | <input type="checkbox"/> _____ |

Personal Items

- | | | |
|---|--|--------------------------------|
| <input type="checkbox"/> Emergency contact list | <input type="checkbox"/> Shower supplies | <input type="checkbox"/> _____ |
| <input type="checkbox"/> First aid kit | <input type="checkbox"/> Sunscreen | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Games | <input type="checkbox"/> Toilet paper | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Medications | <input type="checkbox"/> Toiletries | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Reading material | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |