

PASSEPORT



No. _____

NOM: _____

PROFESSION: _____

COMPÉTENCE(S): _____



PHYSIQUE	MENTAL	ENDURANCE

SURVIVANTS:	S	77	76	75	74	73	72	71	70		
	+/-1	69	68	67	66	65	64	63	62	61	60
	+/-1	59	58	57	56	55	54	53	52	51	50
	+/-1	49	48	47	46	45	44	43	42	41	40
	+/-1	39	38	37	36	35	34	33	32	31	30
	+/-1	29	28	27	26	25	24	23	22	21	20
	+/-1	19	18	17	16	15	14	13	12	11	10
M	+/-1	9	8	7	6	5	4	3	2	1	0

NOTES:

ÉQUIPEMENT

SUR SOI	CAMPMENT



RENCONTRES

NOM:	NOM:	NOM:
S:	S:	S:
FOR:	FOR:	FOR:
END:	END:	END:
<input type="checkbox"/> Vaincu	<input type="checkbox"/> Vaincu	<input type="checkbox"/> Vaincu
NOM:	NOM:	NOM:
S:	S:	S:
FOR:	FOR:	FOR:
END:	END:	END:
<input type="checkbox"/> Vaincu	<input type="checkbox"/> Vaincu	<input type="checkbox"/> Vaincu
NOM:	NOM:	NOM:
S:	S:	S:
FOR:	FOR:	FOR:
END:	END:	END:
<input type="checkbox"/> Vaincu	<input type="checkbox"/> Vaincu	<input type="checkbox"/> Vaincu
NOM:	NOM:	NOM:
S:	S:	S:
FOR:	FOR:	FOR:
END:	END:	END:
<input type="checkbox"/> Vaincu	<input type="checkbox"/> Vaincu	<input type="checkbox"/> Vaincu

