



# 2017 4-H CAMP & JR. LEADER RETREAT

## -- REGISTRATION FORM

Due **Thursday, June 15** to Sweetwater County Extension Office  
 2500 College Drive A-700, Rock Springs WY 82901  
 Jr. Leader Retreat – July 11-12, Camp – July 12-14, 2017

- Only one member per registration form (photocopy or obtain more from the Extension Office or online at [Sweetwater County 4-H](#))
- All fees must be paid before a bed will be reserved for camper.
- No refunds will be made after the registration deadline without a medical emergency.
- Bring a sack lunch or eat prior to arriving at camp. NO lunch is provided on the 1<sup>st</sup> day.
- A signed medical form **MUST** be completed and brought to camp with the 4-H member. **Do not** turn these in with this registration form. We want to make sure we have the most up-to-date medical information so we are having campers bring them to camp with them.

MEMBER NAME: \_\_\_\_\_

AGE AS OF JAN 1st: \_\_\_\_\_ Gender:  M  F

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

Best phone number to contact a parent if we have questions on this form : 1) \_\_\_\_\_  
 2) \_\_\_\_\_

	Description	Fees	Amount	
<b>Junior Leader Retreat</b>	Must be 13 years old as of Jan 1 <b>and</b> enrolled in the Youth Leadership Project	Registration Fee	\$15.00	
<b>4-H Camp</b>	Check in at 1:00 on Wednesday at the Youth Camp. Do NOT arrive before then. (Bring a sack lunch or eat prior to arriving)	Registration Fee (prior to June 20)	\$45.00	
		Late Fee (after June 20)	\$ 5.00	
<b>Family Dinner</b>	Parents will need to pick-up their children at the youth camp on Friday, July 14, 2017. We will conclude camp at 4:00 p.m. with family refreshments and a closing program.			
<b>TOTAL FEES</b>				

<b>T-Shirt</b>	Free shirt if registration is turned in by June 20	Circle Size <b>YOUTH</b> -- 10-12 14-16 <b>ADULT</b> -- S M L XL
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<b>Rides</b>	Jr. Leader	<input type="checkbox"/> I will need a ride <input type="checkbox"/> I have a ride
	Camp (limited to first 28 youth)	<input type="checkbox"/> I will need a ride <input type="checkbox"/> I have a ride

<b>Activities Permission</b>	Camp activities may include archery, riflery, fishing, canoeing, obstacle courses, rock wall, etc. If you have concerns with any of these activities, contact our office <b>BEFORE</b> camp starts.
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<b>Allergies</b>	My child has the following type of allergies  <input type="checkbox"/> Medical <input type="checkbox"/> Food <input type="checkbox"/> Environmental	Please list specific allergies or triggers:
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**EMERGENCY INFORMATION FOR 4-H CAMP**  
**DO NOT TURN THIS IN WITH THE APPLICATION - BRING IT TO CAMP WITH YOU**

1. Name of Camper \_\_\_\_\_
2. Name of Parent or Guardian \_\_\_\_\_
3. In case of emergency, call the following numbers. Please list numbers in the order you want them called.

Number	Person to speak to	Relationship to Camper

4. Doctor's Name & Number: \_\_\_\_\_
5. State any pertinent medical information (chronic illness such as diabetes, epilepsy, fainting. Other items such as bedwetting or sleepwalking):  
 \_\_\_\_\_
6. Please list any over-the-counter medications your child CANNOT have such as Tylenol, Pepto Bismal, Allerest, etc. Be specific.

6. I plan to send the following medications with my child. All medications must be in an original prescription bottle or original bottle in which purchased. Medications must be given to Extension Personnel upon arrival at camp, youth will not be allowed to keep them in their cabins.

Medication	Special Instructions	Amount of medication	Times to be given

*I hereby give permission for my child to attend 4-H camp. I hereby give permission for you, in your capacity as 4-H volunteer in charge of health procedure at the Uinta County 4-H Camp, to provide medical attention you deem necessary.*

*I hereby authorize University of Wyoming Extension -- Uinta County and its faculty members in charge of my child to obtain all necessary medical care for my child in the event that I cannot be reached to authorize it myself. I hereby authorize any licensed physician and / or medical personnel to render necessary medical treatment to my child. Every reasonable attempt will be made to contact you before using this authorization.*

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

**All medications -- including aspirin, allergy, etc. -- must be turned into the camp personnel upon arriving.**

# 2017 4-H Camp Details

**Keep this sheet at home for your reference**

## Camp Details:

Junior Leader Retreat: July 11-12, 2017 Tuesday at 2:00 p.m. thru Wednesday at noon  
4-H Camp for all youth: July 12-14, 2017 Wednesday 1:00 thru Friday at 4:00

**Junior Leader Retreat:** Please let the Extension Office know if you need a ride or will be traveling on your own. **Do not arrive at camp before 2:00 p.m.** If you need a ride, meet at the Extension Office at 12:00 p.m. & eat lunch before you come. Please eat lunch prior to coming to junior leader retreat – no lunch will be provided.

## Camp Rides:

The number of 4-H members attending camp who don't have a ride will determine the need for volunteers to transport or a bus for transportation. If you change your plans for getting to camp, please let us know so we can adjust numbers.

## Own Ride:

If you indicated that you have your own ride to camp, please make sure you **DO NOT** arrive before 1:00 p.m. Youth should have either eaten lunch prior to arriving at camp or bring a sack lunch. No meal will be provided for lunchtime on this day.

Details for those needing transportation will be sent out to 4-H members when we have the final participation numbers.

## NEW THIS YEAR

We are not collecting the camper's medical forms with the camp registration this year. We would like the campers to bring the completed form with them to camp. This allows us to have the most up-to-date information at the time of camp.

## Things to Bring:

Completed Medical Form	
Sleeping bag	Personal items
Pillow	Sun screen
Warm coat	Bug spray
Flashlight	Lots of energy and a GOOD ATTITUDE
Change of clothes and shoes	
Towel	
Soap	

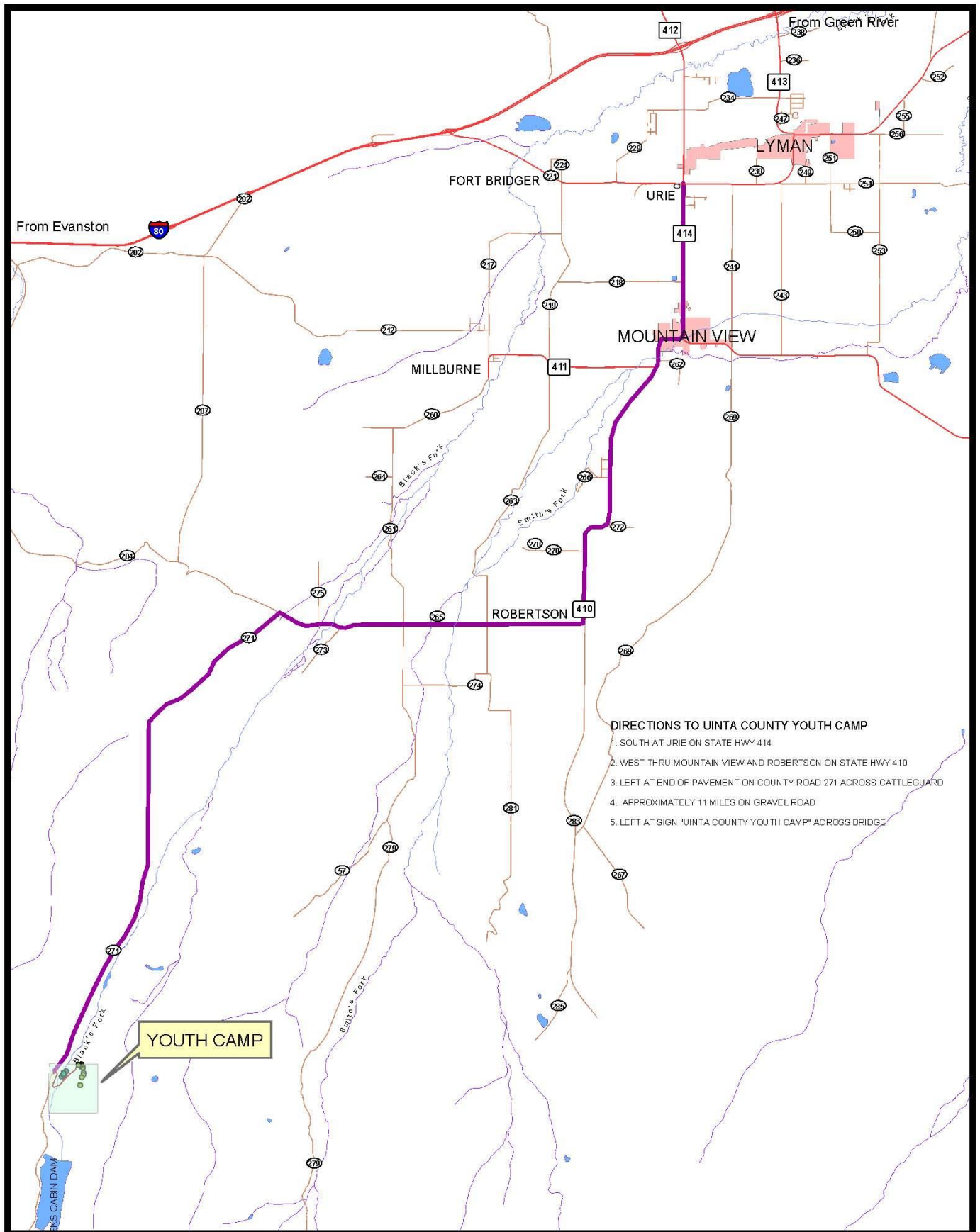
## Family - program

**Flag Ceremony:** will begin at 4:00 p.m.

**Family Refreshments:** will begin at 4:15 p.m.

Visitors must check in at the Lodge. There are several reasons for this request including: our schedule keeps the campers busy until this time; if a child leaves early, we need to know they are with a parent and not missing; and it can be alarming to have unidentified adults mingling with our campers. We welcome you to come as a volunteer or chaperone – even if only for half a day. If you would like to help in this capacity, let us know ahead of time.

**If you need to get a message to someone at camp, contact the Extension Office during normal business hours at 783-0570 or 782-7432 ext. 32.**



**DIRECTIONS TO UINTA COUNTY YOUTH CAMP**

1. SOUTH AT URIE ON STATE HWY 414
2. WEST THRU MOUNTAIN VIEW AND ROBERTSON ON STATE HWY 410
3. LEFT AT END OF PAVEMENT ON COUNTY ROAD 271 ACROSS CATTLEGUARD
4. APPROXIMATELY 11 MILES ON GRAVEL ROAD
5. LEFT AT SIGN "UINTA COUNTY YOUTH CAMP" ACROSS BRIDGE



**UINTA COUNTY WYOMING  
YOUTH CAMP**