



University of Kentucky
College of Agriculture,
Food and Environment
Cooperative Extension Service



CAMPER APPLICATION MORGAN COUNTY 4-H CAMP 2024



“Under the Big Top”

**Morgan County 4-H Camp is for youth ages 9-13
(or 8 years old entering 4th grade)
14-15 years can go as JCIT(JC's in Training)
Spaces fill on a first-come basis.**

Camp Cost: \$225

Deadline: May 10th

**Partial Scholarships are available upon request for those
with financial concerns.**

**2024 Camp theme is Under the Big Top!!
Campers will participate in costume contest,
talent show, and cabin decoration contest.**

*****WE WILL BE DOING MESSY GAMES AGAIN
THIS YEAR*** BRING CLOTHING THAT YOU
DON'T MIND IT GETTING MESSY. WE WILL GO
OVER MORE AT ORIENTATION.**



**Cooperative
Extension Service**

Agriculture and Natural Resources
Family and Consumer Sciences
4-H Youth Development
Community and Economic Development

MARTIN-GATTON COLLEGE OF AGRICULTURE, FOOD AND ENVIRONMENT

Educational programs of Kentucky Cooperative Extension serve all people regardless of economic or social status and will not discriminate on the basis of race, color, ethnic origin, national origin, creed, religion, political belief, sex, sexual orientation, gender identity, gender expression, pregnancy, marital status, genetic information, age, veteran status, physical or mental disability or receipt or possession of prior civil rights activity. Reasonable accommodations of disability may be available with prior notice. Program information may be available in languages other than English.
University of Kentucky, Kentucky State University, U.S. Department of Agriculture, and Kentucky Counties, Cooperating
Lexington, KY 40505



Disabilities
accommodated
with prior notification.





Important Camp Info

Who can Go: Youth do not have to be currently in 4-H. Camp is for youth ages 9-15 (14-15 year old campers participate in the Junior Counselor in Training Leadership Experience) or youth who have completed 3rd grade. 16-17 year old's can apply to be a junior counselor.

Adult Counselors: Any parent or adult (18 and up) interested in attending camp should contact the Morgan County Extension Office for registration packet immediately. All adults undergo a background check, reference check, interview, and approval by Committee before attending 4-H Camp. There is no charge for adults to attend.

How to sign up: Come by the Morgan County Extension office to pick up a detailed camp form and pay the \$50 deposit. Paperwork and deposit needs to be completed by May 10th. Campers do not have to pay the full fee at one time. After making the \$50 deposit they have until May 30th to pay the remaining balance of \$175. The \$50 deposit is non-refundable after May 10th.

Lodging and Meals: Camp registration is \$225 and includes meals, lodging, transportation, a camp t-shirt, insurance, and class fees. All campers will stay in cabins with 10-20 other youth and at least one adult and one teen leader(16-17 year old).

Scholarships: Limited number of scholarships are available. Scholarships are only partial and those who express financial need. Scholarship applications need to be received by May 10th. Recipients will be notified soon after.

Health Forms: We require you provide all health information. We do not require a physical.

Medical Insurance Card: Camper **MUST** submit a copy of his/her/their Medical Insurance Card.

Head Lice Checks: Campers are required to have a lice check done before camp. No camper is permitted to board the bus with a signed head lice check form.



What to Bring: A complete list will be provided at Camper Orientation.

Camper Orientation: All Camper and at least one parent/guarding MUST ATTEND Camper Orientation on May 23, 2024 at the Morgan County Extension Office.

Name: _____ Grade: _____

If possible, I would like to be in a cabin with (same gender only)

1: _____ 2: _____

Please note: All efforts are made to place campers in cabins with those they request, but only a small number of cabins are available. All reasonable efforts will be made to accommodate your requests. Also, please note that we have strict "no Bullying" policy. Parents please notify agents if there are existing issues.

CAMP CLASSES

Please rank your camp classes with 1 being first choice and 22 being your last choice. Classes fill first come first-serve, so turn in your application early! Note: Only "swimming" if you want lessons. Everyone will receive free swim every day.

Campers that are 14-15 will take 2 classes of JCIT and 2 classes from below.

___ Advanced Swim	___ Wiffle Ball	___ CIT (14 and 15 only)
___ Archery	___ Playground	___ Basketball
___ Fishing	___ Arts and Crafts	___ Canoeing
___ High Ropes	___ Yoga	___ Nature
___ Beginning Swim	___ Rifle	___ Recreation
___ Paparazzi	___ Painting	___ Sign Language
___ Flag Football	___ Book Club	___ Pickleball/Shuffleboard
___ VolleyBall		

Date Received in Office:

Received By: _____

This application includes:

- ___ Camper Registration Form
- ___ Copy of Insurance Card
- ___ Completed Class Choices
- ___ Payment in full -\$225
- ___ Deposit-\$50 non-refundable.
- ___ Scholarship recipient





4-H Camp Class Descriptions



Advanced Swimming-a class for campers who have mastered the basics of swimming and want to learn more advanced skills in the pool.

Archery-learn how to shoot a bow and arrow in a safe environment with a certified leader.

Arts and Crafts-favorite camp crafts.

Basketball-learn the ins and outs of the game of basketball.

Beginner Swim-a great intro to the water for those who are just a bit leery of water or just learning to swim.

Book Club: Pack your favorite books for camp to enjoy sitting under a tree while catching up on some reading.

Canoeing-campers will learn how to canoe with a certified canoeing instructor.

CIT class-this class is for camper ages 14-15. They will be gaining leadership skills and experience what it will be like when they are a JC.

Yoga-Come relax in Nature

Fishing-learn to bait your hook and toss in your line for a fun time of fishing at the camp lake.

Flag football-play like the pros without the tackle!

Foods-if you like to cook, or be creative in the kitchen, then class is for you.

High Ropes-this class is all about the high ropes elements including the rock wall and zip line.

Nature-explore nature trails, habitats and other fascination parts of the great outdoors.

Painting Class: enjoy some artistic time with a blank canvas and paint.

Paparazzi-if you enjoy being behind the lens come enjoy taking photos of all the fun going on at camp.

Playground-Carpet ball, 9 square, Gaga ball and new exciting games for 2024

Pickleball/Shuffle ball-join us on the courts for some fun new games.

Recreation-learn group games in this awesome class with camp instructor.

Rifle- learn how to shoot a .22 rifle in a safe environment with a certified instructor.

Sign Language- Here's your sign!! Learn the basics of sign language and a new way to communicate.

Volleyball-enjoy some volleyball time whether its your first time or your pro.

Whiffle Ball- The joy of playing baseball/softball without the need of a glove.



Cooperative Extension Service

HCP Approval Stamp

Kentucky 4-H Camping 2024
Camp Participant Registration – *Camper/Teen*

Last Name:	Legal First Name:	Middle Name:	Preferred Name:
Attended camp before? <input type="checkbox"/> Yes - # years: ____ <input type="checkbox"/> No	Fall 2024 School & Grade:	County:	Biological Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Shirt Size: (Select One) YS YM YL YXL AS AM AL AXL A2XL A3XL A4XL <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>		Birthdate: ____ / ____ / ____	Age on 1st day of camp?
Participant's Home Address:			Participant's Race: <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Asian <input type="checkbox"/> American Indian <input type="checkbox"/> Hawaiian <input type="checkbox"/> Other Participant's Ethnicity: <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic
Legal Parent/Guardian #1 Full Name:	Email Address:		Cell/Home Number:
	<input type="checkbox"/> Yes - I would like to receive email notifications of upcoming statewide Camp-Sponsored Events and Promotions at this email address.		
Legal Parent/Guardian #2 Full Name:	Email Address:		Cell/Home Number:
	<input type="checkbox"/> Yes - I would like to receive email notifications of upcoming statewide Camp-Sponsored Events and Promotions at this email address.		
Emergency Contact Full Name:	Relationship to Participant:	Cell/Home Number:	
Physician Name:	Physician Phone Number:		

Buy your participant some camp gear. www.4hcampstore.com

Is your participant looking for more camp opportunities? www.4hcampevents.com

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PARTICIPANT NAME: _____

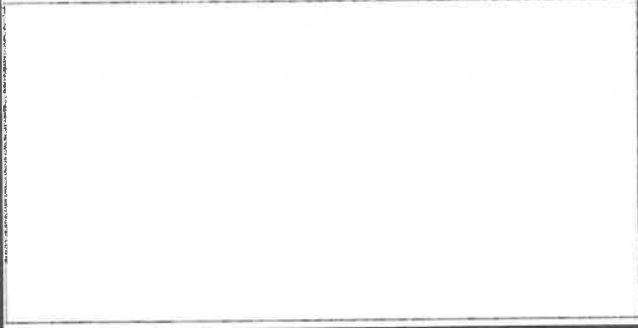
Is the camp participant up to date on immunizations as outlined by Kentucky law required for enrollment in public, private, or home school, based upon the grade the participant will be enrolled for the upcoming school year?

- YES
 NO (If marked NO, check with your 4-H Agent for a waiver of liability form.)

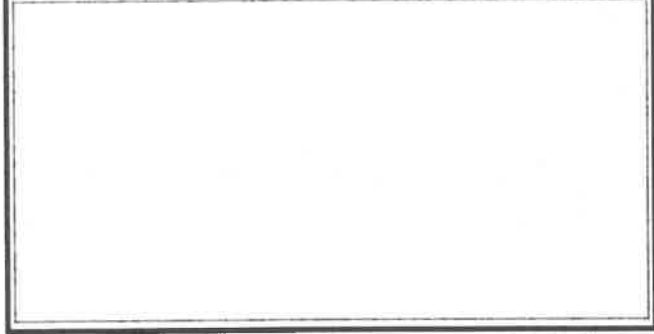
Does the participant have health insurance coverage?

- YES (Insert a JPEG or PNG file – front and back – of the insurance card in the boxes below.
 NO (No worries! The camp provides excess medical insurance coverage in the event of injuries or illnesses.)
 ACTIVE DUTY MILITARY (not required to provide a copy of Military ID/Insurance Card)

FRONT OF INSURANCE CARD



BACK OF INSURANCE CARD



What is **specific** information about your camp participant which the staff should be made aware of to provide a better camp experience for the camp participant? Information disclosed in this section may allow us to make accommodations based on their individualized needs. **List all specific items** that the participant is provided at home or school to have a successful experience.

Behavioral (i.e., mental, emotional, physical)

Medical (i.e., asthma, autism, seizures, sleepwalker, etc.)

Allergies (check the applicable boxes below and describe the allergy and reaction seen)

No known allergies: Food: Medication: Seasonal/Environmental:

Dietary (check the boxes below if applicable)

Vegetarian: Gluten Intolerant: Alpha Gal: Does not eat Pork:

Other accommodations or important details (use additional sheet of paper if needed):



Kentucky 4-H Camping Code of Conduct and Expectations

1. Campers are not permitted to bring cell phones to camp.
2. Possession or use of alcohol, illegal drugs, or weapons by any person is prohibited.
3. Use of tobacco products is not allowed for campers/teens at 4-H camp. Should a county decide to permit adults (21 years and over) to use them, it may occur only in areas designated by the Camp Director. Absolutely no tobacco products are to be used in cabins, woods or non-designated areas of camp.
4. Camp participants are permitted to enter the cabin in which they are assigned. All other cabins are restricted.
5. Campers are not allowed in the cabins during a class or activity. If a camper is ill, they are to stay at the medical center (not in a cabin) until the Health Care Provider (HCP) feels the camper may return to activities.
6. Camp participants are to be attentive, responsive and courteous to any staff, adult or teen counselor making a presentation before the group.
7. Absolutely no phone calls are to be made by campers (camp office phone or cell phone) without approval of the County Extension Agent. All County Extension Agents should be informed of incoming calls at the camp office to campers.
8. Accidents or illnesses, no matter how minor, are to be reported to the County Agent and Camp Healthcare Provider. If medical care is needed, the Agent will coordinate treatment with the Camp Healthcare Provider.
9. Obscene, discriminatory and/or inappropriate language or dress, roughhousing, and insubordination is not acceptable at any time and may result in dismissal from camp.
10. Fireworks are not to be used by camp participants at any time.
11. Swimming, boating, or any waterfront activity is not permitted except during designated times and under proper supervision.
12. Appropriate dress, including footwear, should be adhered to as outlined in the 4-H Camp Dress Code.
13. Camp participants are always to remain with their groups, and must obey the rule of 3 when traveling. Individuals are not to be on the trails or near the lakes without an accompanying adult.
14. Camp participants are not permitted to leave the grounds at any time without notifying and receiving approval from the Contact Agent and their County Extension Agent.
15. Camp participants are expected to be in their cabins, with lights out, as designated on the camp program schedule.
16. No visitors, other than parents or immediate family, may visit campers during the camp. Visits must be approved in advance by the County Extension Agent.
17. No camp participant is to be around or on maintenance equipment.
18. Camp participants who are having personal conflicts with others should discuss these with their cabin counselor, dean, or County Extension Agent.
19. Campers and teens are to work with counselors in carrying out daily assigned jobs to help keep the camp running smoothly. Grounds are to be kept clean at all times. Camp participants are expected to leave the cabins, facilities and grounds clean and orderly.



PARTICIPANT NAME: _____

20. Camp participants are to respect camp property. Any misconduct resulting in damage to camp property or buses, including graffiti, shall be paid for by the camp participant and/or parent or guardian. A list of damage fees is available.
21. All medications must be turned in to the designated adult and picked up by the parent/guardian at the bus pick up site. The Health Care Provider will be responsible for securing all medications at camp.
22. Camp is not responsible for personal property of any camp participant or staff.
23. We care about the safety of all camp participants. Incidents of serious misbehavior (i.e. threats, fighting, bullying, causing injury, alcohol/drug incidents, any altercations between adults and/or minors, intentional property damage/vandalism, etc.) will be reported to the Camp Director and County Extension Agent and an incident report will be completed. Incidents of serious misbehavior may result in dismissal from camp.
24. Camp participants should demonstrate respect toward others. Bullying, hazing, or pranks (i.e.: shaving cream, toothpaste in pillow/sleeping bags, defacing property, including inappropriate use of electronics/social media) will not be tolerated and may result in dismissal from camp.

Any conduct inconsistent with the above rules may result in consequences such as the camp participant/parent/guardian/immediate family member being sent home, restricting future participation in 4-H activities, termination of 4-H membership, or other consequences determined by the county's or state's policy. If a camper must be sent home, it will be the responsibility of the parent/guardian to pick them up at camp. There is no refund of the camp fee for an early departure.

Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____



PARTICIPANT NAME: _____

Kentucky Residential 4-H Camp Essential Standards for Camp Participants

It is the policy of the University of Kentucky, Kentucky 4-H and the Kentucky 4-H Camping program to encourage and accept participants without regard to race, color, ethnic origin, national origin, creed, religion, political belief, sex, sexual orientation, gender identity, gender expression, pregnancy, marital status, genetic information, age, veteran status, or physical or mental ability. Parents/Guardians of children who have medical conditions or other disabilities requiring special attention should alert the agent to ensure proper care and accommodations are provided. If the camper requires personal care or a level of attention not available through camp staff or volunteers, a family friend or relative of the same sex over age 18 or a parent/guardian must accompany the child as a caregiver. The parent/guardian will agree to pay the individual costs of the caretaker (25% of the camper registration fees.) The Client Protection Process will be performed on the caretaker with favorable results.

To determine whether a caregiver should accompany a camper, the following factors will be considered:

- Ability to dress without assistance
- Ability to maintain personal hygiene, e.g. bathing, brushing teeth
- Ability to attend to toileting needs
- Ability to understand and follow oral or written instruction
- Ability to remain at rest or sleeping according to the camp schedule
- Ability to participate in group activities with minimal individual attention
- Ability to participate in a communal living environment with minimal individual attention
- Ability to sustain a 15-hour (7am-10pm) camp day with limited rest periods
- Ability to understand and respond to dangerous conditions
- Ability to take medications according to a pre-set schedule and with minimal assistance

If a caregiver is not provided and a camper cannot meet the essential standards listed above, they may be dismissed from camp. If a camper must be sent home, it will be the responsibility of the parent/guardian to pick them up at camp. There is no refund of the camp fee for an early departure.

I have reviewed and acknowledge the essential standards for camp participants policy.

Parent/Guardian Signature: _____ Date: _____

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University of Kentucky, Kentucky State University, U.S. Department of Agriculture, and Kentucky Counties, Cooperating.
Lexington, KY 40506



PARTICIPANT NAME: _____

AUTHORIZATIONS/RELEASES
This is a legal document. You must read and understand it before signing it.
MEDIA RELEASE:

I grant the Kentucky 4-H Program and the University of Kentucky, Kentucky State University, and persons acting through them, the right to use, reproduce, assign, and/or distribute photographs, films, videotapes, and sound recordings of my minor child without compensation for use in promotion/advertising, educational publications, electronic publishing, and personal memorabilia. Participant names may be published.

 Yes. I grant permission for media releases. No. I do not grant permission for media releases.

Pick-up Release:

It is my responsibility to arrange to pick up my child/children upon return from camp. There will be no exceptions to this policy regardless of relationship to the child. Please inform everyone approved by you on this release that he/she must present a driver's license or photo ID before the child will be released. **Parents, Guardians, and Emergency Contacts listed on page 1 and 2 are automatically assumed to have pick up authorization.** In addition to the parents/guardians listed on page 1, the following individuals are granted permission to pick up my child:

NAME: _____	RELATIONSHIP _____	Phone/Cell# _____
NAME: _____	RELATIONSHIP _____	Phone/Cell# _____
NAME: _____	RELATIONSHIP _____	Phone/Cell# _____

CONSENT TO TREAT:

The health history reported on page one and two are correct and complete to the best of my knowledge. I hereby permit the camp to provide routine health care, administer over the counter medication, assist in administering participant's prescription medications as needed, and seek emergency medical treatment including ordering x-rays and routine tests. I agree to the release of any records necessary for treatment, referral, billing, or insurance purposes. I permit the camp to arrange necessary related transportation for my child. In the event I cannot be reached in an emergency, I hereby permit the physician selected by the camp to secure and administer treatment, including trips off camp property.

CODE OF CONDUCT:

I have read and discussed the Camp Code of Conduct with my participant. We (parent/guardian and participant) understand and agree to comply with the guidelines. Violations may result in loss of privileges, removal from camp with no refund, assessment of a damage fee for which I will be responsible for paying, and/or ineligibility to participate in future 4-H events. An incident report will be completed for major violations.

ASSUMPTION OF RISK, RELEASE OF LIABILITY, and PERMISSION TO PARTICIPATE:

I acknowledge that there are certain risks, hazards, and dangers, including the risk of physical injury, disability, or death and risk of loss of use or damage to my personal property as a result of allowing participation in the camping program. Risks include but are not limited to recreational games and traditional camp activities, transportation accidents, weather-related hazards and natural disasters, infectious diseases, the possibility of slips and falls, pinches, scrapes, twists, and jolts that could result in scratches, bruises, sprains, lacerations, fractures, concussions, or even more severely debilitating or life-threatening hazards. I understand that injury or loss may result from unknown or unexpected risks and the use of equipment, materials, or facilities recommended by the University of Kentucky; environmental conditions; from the acts or omissions of others; or from the unavailability of immediate and adequate emergency medical care. I understand that the University of Kentucky does not guarantee the personal health or safety of participants, nor does it protect against the risk of loss of personal property. In consideration for allowing my child to participate in the camping program, I do hereby release the University of Kentucky, the University of Kentucky Cooperative Extension Service, the county Extension District Board(s), the 4-H Camp, Kentucky State University and their trustees, directors, officers, members, agents, employees, volunteers, and assigns from any and all liability, damages, cost, and expenses arising out of or relating to bodily or psychological injury, loss of life, or personal property that may occur as a result of participating in the camping program. I understand that my child's participation in the Kentucky 4-H Summer Camping Program is based on the challenge by choice philosophy. I recognize that programs are designed to use experiential, engaging teaching techniques, but that my child's participation is purely voluntary, always, and my child will choose his or her level of participation in any activity (including, but not limited to: high ropes, rock climbing, low challenge elements, rifles, archery, trap shooting, horses, and cave exploration). I understand that my participation in this activity may entail certain anticipated and unanticipated risks regarding personal injury or illness. I further understand and acknowledge that there is currently a COVID-19 pandemic in the U.S. and that there may be health risks associated with entering facilities and/or participating in activities and events owned or operated by the University of Kentucky or the University of Kentucky Cooperative Extension Service. I hereby acknowledge my voluntary and informed assumption of full responsibility and liability regarding any injuries or illness, including COVID-19, that I may incur coincident to my participation in this activity.

Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

