



COFFEY COUNTY 4-H CAMP ADULT VOLUNTEER REGISTRATION



Camp: June 1-3rd

Completed registrations are due to your local extension office by March 31st

Background

___ I am a Coffey County 4-H certified volunteer.

___ I am not a certified 4-H volunteer, but I am in the process of completing my 4-H online submission as well as completing a Criminal Background Check.

Volunteer Availability

___ I am available for the full duration of 4-H camp. Including transportation pick up/drop off, day activities, meals, and overnight.

___ I am available to volunteer during these specific times of camp (Mark (X) all that apply)

<u>Volunteer Times</u>	<u>June 4th</u>	<u>June 5th</u>	<u>June 6th</u>
Transportation (Pick up/Drop Off)		NA	
Morning (7a-12p)			
Afternoon (12p-5p)			
Evening (5p-9p)			NA
Overnight (9p-7a)			NA

Volunteers staying overnight will be accommodated to an assigned cabin.. Volunteers will not stay with 4-H members.

Name: _____

Cell Phone #: _____ Email address: _____

Please complete the additional following forms. All forms are available at the extension office or on our website.

___ Coffey County Extension Insurance Form Completed

___ WMC Camp Permission and Release Form Completed

___ Medication/Food Allergy Form Completed

I have read the 4-H Volunteer Code of Conduct and agree to its terms.

Signature of Volunteer _____ **Date** _____

Kansas State University is committed to making its services, activities and programs accessible to all participants. If you have special requirements due to a physical, vision, or hearing disability, contact Coffey County Extension, Jill Barnhardt, 225 Cross St, Burlington, KS 66839, jbarhardt@ksu.edu

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