4-H Camp at Eisenhower State Park
Afternoon June 20, 2023- Afternoon June 22, 2023

Coffey County 4-H Camp is open to all youth age 7 through 13 (as of 1/1/23). This completed registration form with payment is due to the Coffey County Extension Office by Friday, May 5, 2023.

Should the goal of 30 campers NOT be reached, a full refund will be provided.

Camper Name: ____________________________ 4-H Club: ________________________________

Gender: _______  Birth Date: ___/___/___  4-H Age: _______ (Age as of 1/1/23)

Parent or Guardian: ________________________________________________________________

Home Phone #: ____________________  Work #: ____________________  Cell #: ____________________

Home Address: ________________________________________________________________

Email Address: ________________________________________________________________

Camp Fee per Camper: $75.00

- Please make checks payable to: Coffey County 4-H Council
- Fee includes 2 days of activities, 6 meals, tent camping, and take home souvenirs

_____ My child has food/dietary allergies. Additional information will need to be submitted

_____ My child has social-emotional and/or behavioral challenges that may require accommodations. In order to help our staff/volunteers best meet the needs of your child, please contact the Extension Office to discuss further.

______________________________________________________________________________

Please complete the following forms. All forms are available at your local extension office.

_____ Coffey County Extension Insurance Form

_____ Medication/Food Allergy Form

_____ 4-H Camp Medication Form for youth taking prescription and over the counter medications

- A form must be filled out for EACH medication and brought to camp with each medication and form in a separate, resealable plastic bag
- All medications will be kept at the nurse’s station during camp. Exception: emergency meds such as inhalers, epi pens, etc. may be kept with camper. A second set of emergency meds must be sent to camp to be held at the nurse’s station.

Parent/Guardian Signature: ____________________________  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, jbarnhardt@ksu.edu

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