4Clover 4-H Camp
June 12-14, 2024
Dodge City Community College
4-H Members 7 to 10 years of age

Starting at 11am Wednesday, June 12
and ending at 12:30pm Friday, June 14

Over night 4-H Camp where youth will learn social skills, healthy living, enhance creativity and build friendships

COST:
Ford County Members $50 ($110 minus $60 scholarships)
includes, housing, 7 meals & snacks, educational activities and recreational activities

REGISTRATION DUE: Friday, May 31st to Ford County Extension Office

BLAKE STANLEY MEMORIAL SCHOLARSHIP: Six $50 scholarships will be provided to youth who complete a 250 word essay (included with registration) that explains why they want to come to camp and could use some financial assistance.

ACTIVITIES INCLUDE:
STEM Activities
Crafts
Foods & Nutrition
Recycling
Fishing
Games
Animal Science Activities
Swimming at the Longbranch Lagoon
Ice Cream in a Bag

K-State Research and Extension is committed to providing equal opportunity for participation in all programs, services and activities. Program information may be available in languages other than English. Reasonable accommodations for persons with disabilities, including alternative means for communication (e.g., Braille, large print, audio tape, and American Sign Language) may be requested by contacting the event contact Sharon Erickson Fryback two weeks prior to the start of the event June 10th at 620-855-3521 or sharone@ksu.edu. Requests received after this date will be honored when it is feasible to do so. Language access services, such as interpretation or translation of vital information will be provided free of charge to limited English proficient individuals upon request.

Kansas State University Agricultural Experiment Station and Cooperative Extension Service
4-Clover Camp Registration Form

Registration Deadline: May 31st to the Ford County Extension Office

Camper Name: _________________________________________________________________

Circle one: Male    Female    Prefer not to respond

Birth Date: _____/_____/_____  Age: _____  Grade Completed: _____

Address: ____________________________________________________________________

City/State/Zip: ____________________________________________________________________

Parent/Guardian: ____________________________________________________________________

Home Phone: ___________________________  Cell Phone: ____________________________

E-mail: ________________________________

Friends I would like to room with:
1. ____________________________________  2. ________________________________

Please ask that your friends to list you on their registration as well. Scheduling does not always permit groups or friends of different ages or counties to stay together. No more than two youth will be assigned a room, and no more than four youth will be assigned a suite. The staff will make reasonable efforts to house you with at least one of your choices.

Risk Management:
I am allergic to the following: ____________________________________________________________

_____________________________________________________________________________________

My Swimming abilities are: (please mark one)

_____ I need to stay in the shallow end.

_____ I can swim well enough to be in the deep end.

Special Needs Statement:
4-Clover 4-H Camp group strives to be all inclusive of youth. Safety of our participants is of upmost importance to us. Therefore, if your child works under an IEP (Individual Education Plan) during the school year for any reason emotional, social, behavioral or physical and/or requires one on one attention, we ask that you share this information with your local extension staff prior to sending your child to camp. This will allow us to come up with a plan of action that is best for your child and the entire camp group.

Campers Fee: $50 (110 4-H Camper minus $50 Ford County 4-H Foundation and $10 4-H Council)
Camp fee includes lodging, meals, nurse, adult supervision, special programs, and the use of Dodge City Community College facilities.

Please make checks payable to: Ford County 4-H Council Enclosed is: (please check all that apply)

_____ $50 Camper Fee

_____ Camp Medication Forms