



MULTI COUNTY 4-H CAMP LETTER

MAY 2018

114 W. Main, Brady, TX 76825 325-597-1295

4-H MULTI COUNTY CAMP

"EAT, SLEEP, 4-H, REPEAT"

(Brown, Callahan, Concho, Llano, Mason, McCulloch, Menard, Runnels)

- Date: July 10, 11, 12, 2019
- Place: Heart of Texas Bible Camp, Brady, TX
130 PR 734 Brady, TX
- Registration Deadline: **Monday, June 25, 2019** (Unless we already have our limit of 120)
- Times: Begins: Wednesday, July 10 at 3:00 pm
Ends: Friday, July 12 at 9:00 am (After camp clean up)
- Cost: \$50.00 per person \$45.00 if more than one per family
- Ages: Jr. & Intermediate age 4-H members for the 2018-2019 4-H year.
(under 8 must be accompanied by a parent with CEA approval)
Sr. Members may attend only as Teen Leaders with CEA approval.
- What to bring: Bed Roll or Sleeping Bag
Pillow
Towels (extra for swimming)
Personal Hygiene items (soap, shampoo, toothpaste, deodorant, hair brush, etc)
Bathing suits
Sun Screen, bug spray
Comfortable clothes and shoes
If you bring medications, they **must be in original bottles** with labels contained in a baggie with your name and county on the baggie.
- What **NOT** to bring: Electronic Devices (ipods, cell phones, video games)
Expensive jewelry/accessories
Axe or similar body sprays
- Dress Code: School Appropriate attire. **No** "Daisy Duke" shorts, halter tops, spaghetti string tops, shirts/pants that show mid-riff, or clothing/caps etc. that advertise alcohol, tobacco products or anything else that is not appropriate. Please counsel your 4-Hers about bringing appropriate clothing.

Pick up forms at your Extension Office.

Please return completed Minor's Release & Health History form and camp fee by June 25, to:

Texas A&M AgriLife Extension
McCulloch County
114 W. Main
Brady, TX 76825

MULTI-COUNTY 4-H CAMP

JULY 10, 11, 12, 2019 @ Brady's H.O.T Bible Camp

(Brown, Callahan, Concho, Llano, Mason, Menard, McCulloch & Runnels Counties)

\$50.00 per Camper ... families with more than one camper - \$45.00 per family member...

Fees waived for Supervising Adult leaders/Agents

Each camper must be a 4-H member that has completed a 4-H Connect registration in their County Extension Office by June 01, 2019. Camp Registration Deadline June 25, 2019. Due to space limitations, registrations will be accepted on a FIRST COME, FIRST SERVE basis (70 girls, 50 boys) until the camp is full. Make checks payable to "McCulloch 4-H".

(Jr. and Int. ages, under Age 8 must be accompanied by a parent with CEA approval, Srs. are Teen Leaders with CEA approval)

County _____ Name _____

Male _____ Female _____ Address _____

Date of Birth _____ Age _____ City _____ Zip _____

Parent or Guardian _____

Home Phone: _____ Cell Phone: _____

Relative or neighbor to be contacted in case parent or guardian cannot be contacted in any emergency:

Name _____ Phone _____ Cell _____

Physical Limitations or Handicaps _____

Yes _____ No _____ **SPECIAL MEDICATIONS** are being sent with minor in quantity to meet his/her needs during camp. If yes, (**Prescription medications must be in original containers**), list generic name drug(s) and/or medication, along with name and phone number of prescribing physician, dosage, consumption rate and interval _____

Special Dietary needs or conditions _____

Health History: (Please check any of the following which apply.)

Frequent Ear Infections _____

Allergies:

Hay Fever _____

Heart defect/disease _____

Ivy Poisoning _____

Convulsions/Epilepsy _____

Insect Stings _____

Diabetes _____

Penicillin _____

Bleeding/Clotting disorders _____

Other _____

Operations or serious injuries (approximate dates) _____

Chronic or recurring illness or communicable diseases: _____

Name of Family Physician _____ **Phone** _____

Are your immunizations current _____ Yes _____ No _____

Date of last tetanus immunization _____

Please check "over the counter" medication in with which camp personnel may administer as necessary:

____ Acetaminophen ____ Ibuprofen ____ Imodium ____ Pepto Bismol ____ Neosporin ____ Benadryl

BE SURE TO COMPLETE THE ATTACHED MINOR'S RELEASE

MINOR'S RELEASE

I, or we, parent(s) or guardian(s) of a minor child named _____ do hereby give consent for said minor child to participate in all activities scheduled as part of the Multi-County 4-H Camp to be conducted at the Heart of Texas Bible Camp, Brady, Texas.

_____ Yes _____ No

I hereby give my consent for Media/photograph release, filming, videotaping and/or audio recording or other means of capturing my child's image or voice and/or being quoted in the media or printed materials (including social media websites) at camp. _____ Yes _____ No

I/we do hereby consent for said minor child to participate in organized swimming activities conducted at the Brady Municipal Swimming Pool.

_____ Yes _____ No

I, or we further give permission to have emergency first aid administered by any qualified person in case of illness and/or injury to said minor child and to have said minor child transported by the most expedient means of conveyance to the nearest physician, hospital or clinic and to there receive such treatment as is medically prescribed by physician(s).

Further, I or we, do hereby authorize the release of medical records by hospital, clinic, and/or physician for the purpose of filing insurance claims.

In case of extreme illness and/or injury, I, or we, do further agree that the Texas AgriLife Extension Service and Texas 4-H Youth shall not be held responsible or liable for personal injury or loss resulting either on the premises of the Heart of Texas Bible Camp or enroute to and from the camp.

*Further, I or We, do hereby authorize 4-H Extension Agents or Leaders
to release said minor child to the following person/people at the conclusion of the
Multi-County 4-H Camp...
(camp release is after camp clean-up around 9:00 am)*

Signature of Parent or Guardian

Date

BE SURE TO COMPLETE THE ATTACHED MEDICAL HISTORY