

**To be registered, each 4-H camper must complete and turn in the following:**

- 4-H Camper Registration Form (both sides)
- Pick-Up Authorization (Only if someone other than parent/guardian is picking up youth)
- Camp Fees:     \$85.00 Early Bird if paid in full by May 25     \$100.00 After May 25

Make checks payable to **Morrow County Leader's Council**

Return to: OSU Extension Service, Morrow County Extension, PO BOX 397, Heppner, OR 97836

\* = Required Fields      Please print

Last Name\* \_\_\_\_\_ First Name\* \_\_\_\_\_ MI \_\_\_\_\_  
 Preferred Name \_\_\_\_\_ Email \_\_\_\_\_  
 Address\* \_\_\_\_\_ City\* \_\_\_\_\_ ST\* \_\_\_\_\_ Zip\* \_\_\_\_\_  
 Birth Date\* (MM/DD/YYYY) \_\_\_\_\_ Age \_\_\_\_\_ Gender\*  Male  Female  
 Primary Phone\* \_\_\_\_\_ Cell Phone \_\_\_\_\_

Parent 1	Parent 2
First* _____ Last _____	First _____ Last _____
Address (if different) _____	Address (if different) _____
City _____ Zip _____	City _____ Zip _____
Home # _____ Work# _____	Home # _____ Work# _____
Cell # _____	Cell # _____
E-mail _____	E-mail _____

Other Emergency Contact Name\* \_\_\_\_\_ Phone\* \_\_\_\_\_ Relationship \_\_\_\_\_

Ethnicity (check one)     Hispanic     Not Hispanic     Prefer Not to State

Race (check all that apply)     White     Black     Alaskan/Am Indian     Hawaiian/Pac. Island     Asian     Other     Prefer Not to State

Residence (check one)     Farm     Rural (< 10,000)     Town (10,000 - 50,000)     Suburb     City (> 50,000)

T-Shirt Size (check one)     Youth Small     Youth Medium     Youth Large     Adult Small     Adult Medium     Adult Large  
 Adult Extra Large

Do you qualify for free or reduced lunch? (check one)     Yes     No

Allergies to Food or Special Dietary Restrictions? (check one)     Yes     No If yes, describe: \_\_\_\_\_

How many years have you been to our camp? \_\_\_\_\_ Grade completed at camp time\* \_\_\_\_\_

If possible, I would like to be in a tent with \_\_\_\_\_. (You may list ONE person and they should be in the same grade or only 1 grade different from you. You may not request a specific counselor.)

Do you need accommodations for a disability to participate in this program? Describe: \_\_\_\_\_

\_\_\_\_\_ (attach additional page if needed)

Other requests/Notes: \_\_\_\_\_  
 (attach additional page if needed)

**Both sides of this form MUST be completed!**

## Oregon 4-H Youth Development Program Youth Code of Conduct

The well-being of all 4-H program participants is important. Everyone has responsibilities.

*4-H is a positive youth development program. Therefore, when I participate in 4-H programs and events, I agree to . . .*

1. Engage fully with a positive attitude and creative energy.
2. Be courteous to others, even if they're different from me.
3. Be cooperative. Encourage individuals. Help others. Support teamwork.
4. Be willing to ask an adult for guidance to make good decisions and take appropriate actions.
5. Use language that is respectful to others. (Swearing, harassment, and bullying are not allowed.)
6. Take care of the property I interact with, and assume responsibility for purposeful damage I may cause.
7. Wear appropriate clothing for program activity(s). Follow the specific dress code, if provided.
8. Be present and on time for all parts of the program. (I will notify the appropriate supervisor if I have a health or schedule problem.)
9. Use technology (iPods, mp3 players, game devices, cell phones, etc.) during free time, or in ways that contribute to the goals of the program.
10. Treat animals humanely and provide them appropriate care.
11. Not engage in Personal Displays of Affection (PDA). (It is distracting and inappropriate.)
12. Refrain from use of tobacco, marijuana, alcohol, or illicit drugs, or be under their influence while participating.
13. Follow safety policies of the Oregon State University Extension Service, and guidelines of the 4-H Youth Development Program, (such as: not leave the program area without permission from the program supervisor; be in assigned lodging during overnight activities; abide by curfew hours; remain in gender specific areas [no boy in a girl's room / no girl in a boy's room]; handle firearms only in secured, designated areas under the direct supervision of a trained 4-H Shooting Sports volunteer; not use fireworks), as well as safety policies established for a specific event.

*I have read and agree to the above Code of Conduct. I understand that if I violate any part of this agreement, I may be sent home from a 4-H activity at the expense of my parent(s) or guardian(s). I also understand that if I cause personal or public safety concerns, I may lose my eligibility to participate in some future 4-H Youth Development events, and/or, lose my membership privileges.*

\_\_\_\_\_ **Camper Signature (Required)**

\_\_\_\_\_ **Date**

\_\_\_\_\_ **Parent/Guardian Signature (Required)**

\_\_\_\_\_ **Date**  
Revised 8/26/15

### Research and Evaluation Statement

*As part of your child's participation in this 4-H program, he or she may be asked to complete an evaluation related to what he or she learned and experienced in the program. These evaluations are part of 4-H's ongoing program monitoring and provide valuable information about the impact of the program on youth. Your child will always be asked if he or she wants to participate in the evaluation, and will not be required to do so if he or she does not want to. Should your child choose not to participate, his or her participation in this program will not be affected in anyway."*

Revised 8/26/15

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#### Office Use ONLY

Enrollment Form Received: \_\_\_\_\_

By: \_\_\_\_\_

Date Entered: \_\_\_\_\_

Waiver of Liability Received: \_\_\_\_\_

By: \_\_\_\_\_

Entered By: \_\_\_\_\_

Health / Code of Conduct Received: \_\_\_\_\_

By: \_\_\_\_\_

✓ By / Date: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

\$ Info: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Notes:

**Tri-County 4-H Camp  
Pick-Up Authorization**

(Fill in blank ONLY if someone other than parent/guardian is picking up youth.)

I, \_\_\_\_\_, parent of \_\_\_\_\_,  
give my permission to have \_\_\_\_\_ pick up my youth  
from Tri-County 4-H Camp on Sunday, June 18<sup>th</sup> at Cutsforth Park.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date