

Iowa 4-H Center - Day Camp Participation Agreement

Camper's Name (Please print): _____

I/We approve this application and certify that the participant is capable of such an experience. During or after the registered session, camp fees are not refundable without a doctor's authorized medical reason. Any refunds that are granted will be disbursed in the same form that the payment was made. I/We understand that no refunds are given if a child leaves early because of homesickness or for disruptive behavior as determined by the Camp Director. The service charge/deposit of \$30.00 per week of Day Camp is not refundable or transferable under any circumstances.

I/We grant permission for the participant to participate in all planned camp activities such as, but not limited to: canoeing, high ropes, climbing, out-of-camp trips by van or bus, and hiking. In case of an accident or illness, the 4-H Center is authorized to secure emergency medical treatment. I/We understand prudent attempts will be made to contact the undersigned immediately. I/We understand that I/We will be responsible for payment of all medical bills. The 4-H Center is not responsible for lost, stolen, or damaged personal articles. I/We, also authorize the 4-H Center to have and use photographs, slides, and video tapes of the person named on this application as may be needed for public relations purposes.

I/We understand many activities at camp involve a known and reasonable risk and that everything possible will be done to provide a safe environment for our campers. Campers have the responsibility, as a voluntary participant, to abide by all rules, to listen, and to follow all instructions given by activity leaders. In the event of an unforeseen or reasonably unpredictable circumstance, by our camper's voluntary participation in an activity, I/We are aware of and have acknowledged the existence of a risk and I/We clearly share in its assumption.

I/We, individually and corporately agree to hold harmless Iowa State University, ISU Extension, the Iowa 4-H Foundation, the Iowa 4-H Center, its volunteers, agents, employees, and officers irrespective of any negligent act or omission by the 4-H Center and/or those individuals arising from or related in any way to Iowa State University and the 4-H Camping program.

I have read and understand the above description. (Signature required for your child to attend camp)

Parent Signature: _____ Date _____

Behavior Policy

Campers are expected to exhibit appropriate behavior at all times. In the event that a camper brings drugs, alcohol, cigarettes, weapons, or explosive devices (including fire crackers) to camp, parents will be contacted immediately to dismiss the camper. The Iowa 4-H Center also reserves the right to store camper's personal items that may be inappropriate to their stay. Items will be returned at the end of the week. If a camper is destructive to camp property (breaking windows, graffiti, etc.) the parent will be contacted for appropriate payment and/or dismissal from camp. The Iowa 4-H Center reserves the right to dismiss any camper due to violence, bullying, or other destructive behavior. Parents are responsible for picking their campers up at camp if they are being dismissed for negative behavior. Registration fees may or may not be returned at the discretion of the Program Director.

Parent Signature: _____ Date _____

Parent, please read the following to your camper and have them sign that they understand.

I understand that I am coming to day camp to learn new things, spend time outside, be a good friend, and have fun. I know there are camp rules that I must follow so everyone can be safe. I agree to follow the Iowa 4-H Center rules including showing respect for other day campers and their belongings, listening to my day camp counselors, always wearing my seat belt in the camp van, only walking when I have flip-flops on my feet, and washing my hands before meals and snacks.

Day Camper Signature: _____ Date: _____