General Information

4-H Camps are open to ALL YOUTH. Camps run from 9 AM with registration starting at 8:30 AM. A parent showcase is performed at 2:30 PM and youth are free to leave at 3:00 PM. A sack lunch and a water bottle is required for each camp. Two snacks will be provided.

Space is limited to 15 youth per camp and is on a first come first serve basis. Registration is not complete unless entry fee is paid and medical form is turned in with registration. Scholarships are available for those with financial need. Registration deadline for all camps is June 1, 2016.

Camps are divided by Ages and Stages of Development. Youth must be going into the age groups of the camp they sign up for. Youth wanting to participate in a different age camp will be put on a waiting list and notified the week before camp if they are able to attend.

Youth may register for multiple camps during the summer. The first camp is $15 and all additional camps are $10.

Adult volunteers are always welcome. If you are interested in assisting with a camp please contact the ISU Extension and Outreach-Clayton County at 563-245-1451 so we may run a background check and place you with the camp of your choice.

Thank you to all of our partners and sponsors who have contributed to the summer day camps this year!

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**K-6**

- **Edible Earth**
  - June 28- Elkader Central School Garden

- **Little Camp on the Prairie**
  - July 7- Osborne Heritage Village and Nature Center

- **Insect Zoo**
  - July 29- Elkader City Park Shelter

- **Fair Funtivities- FREE**
  - August 3- National, Clayton County Fairgrounds

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**K-3**

- **Art-a-Palooza**
  - June 2- Strawberry Point Civic Center
  - June 6- Guttenberg Creativity Center
  - June 9- McGregor Landing Event Center

- **Camp Lend-a-Hand**
  - June 13- Eagle Ridge Assisted Living, Guttenberg
  - June 16- Edgewood Convalescent Home
  - June 17- Monona Garden View

- **Do You Want to Build a Snowman?**
  - June 22- Edgewood City Park
  - June 23- Elkader City Park
  - July 11- Guttenberg City Park

- **Robots in Space**
  - June 27- Guttenberg Creativity Center
  - June 29- Monona Library
  - June 30- Strawberry Point Civic Center

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**4-6**

- **Lights, Camera, Action**
  - June 6- Guttenberg Community Center
  - June 8- Strawberry Civic Center
  - June 9- Monona High School Auditorium

- **Art-a-Palooza**
  - June 13- Guttenberg Creativity Center
  - June 15- McGregor Landing Event Center
  - June 16- Edgewood Community Room

- **Robots in Space**
  - June 22- Edgewood Community Room
  - June 23- Elkader Freedom Bank
  - July 11- Guttenberg Creativity Center

- **Games Galore**
  - June 27- Guttenberg City Park
  - June 29- Monona City Park
  - June 30- Strawberry Point Civic Center
DO YOU WANT TO BUILD A SNOWMAN?
Winter is a good time to stay in and cuddle but attend this camp and you’ll be a Happy Snowman! This camp is as COOL at they come with many fun activities for K-3 graders to beat the summer heat.

CAMP LEND-A-HAND
New! A camp that gives back! K-3 graders will spend the day at a senior center playing, crafting, and gifting their time to others. Multi-generational friendships are at the heart of Camp Lend-a-Hand.

LITTLE CAMP ON THE PRAIRIE
Step in to the shoes of Pa, Ma, and Laura in the Pioneer Village at Osborne Nature Center. Make cane fishing poles, dip candles, churn butter, participate in a class at the school house, play tug of war and more. Costume is not required, but welcomed. K-6 welcome!

INTRODUCING THE WORLD OF SPACE EXPLORATION.
Program a Mars Rover, shoot off a water rocket, and bring an egg safely down to earth. K-3 and 4-6 may differ in curriculum.

ROBOTS IN SPACE

FAIR FUNTIVITIES
FREE CAMP! Animals, activities and fun! This K-6 camp is packed full of exciting activities to do in the 4-H Activity Tent, includes a tour of the fair animals and lets kids explore what the Clayton County Fair has to offer. Gate fees do apply.

INSECT ZOO
Join the Iowa State Insect Zoo in a fun day filled with hissing cockrachas, maggots, walking sticks and so much more. K-6 grades will make bug crafts and go on a bug hug before visiting with an entomologist.

EDIBLE EARTH
Join FoodCorps member, Cassie Panther as she takes you on a journey of exploring and tasting the world around you. Held at the Central School Gardens. K-6.

LIGHTS, CAMERA, ACTION
Welcome to the world of theater. Learn what goes on behind the scenes and show your talent on the stage in this 4-6 grade camp.

GAMES GALORE
Video and board games come to life with this interactive camp designed to get kids thinking and moving. Life-size Hungry Hungry Hippo, Minecraft GPS locating are sure to delight every 4-6 grader.

ART-A-PALOOZA
Paint, Draw, Sculpt, and Play during Art-a-Palooza. K-3 and 4-6 grades will dabble in all forms of art in a day packed with creativity.

OCTOBER 2017 CAMP NEWSLETTER

IOWA STATE UNIVERSITY Extension and Outreach
Extension programs are available to all without regard to race, color, national origin, religion, sex, age, or disability. The fees for service will be used to off-set direct expenses and to support the 4-H Youth Development Clayton County Extension Program.
Day Camp Registration Form

Child’s Name____________________________________________
Grade (Completed)____________________ Gender_____________
4-H Club (if any) ____________________________________
Parent’s Name___________________________________________
Address ____________________________Town_______________
State_____________ZIP__________ E-mail ___________________
Main Contact Phone Number _______________________________

K-3
Art-a-Palooza
___ June 2- Strawberry
___ June 6- Guttenberg
___ June 9- McGregor

Camp Lend-a-Hand
___ June 13- Guttenberg
___ June 16- Edgewood
___ June 17- Monona

Do You Want to Build a Snowman?
___ June 22- Edgewood
___ June 23- Elkader
___ July 11- Guttenberg

Robots in Space
___ June 27- Guttenberg
___ June 29- Monona
___ June 30- Strawberry Point

4-6
Lights, Camera, Action
___ June 6- Guttenberg
___ June 8- Strawberry
___ June 9- McGregor

Art-a-Palooza
___ June 13- Guttenberg
___ June 15- McGregor
___ June 16- Edgewood

Robots in Space
___ June 22- Edgewood
___ June 23- Elkader
___ July 11- Guttenberg

Games Galore
___ June 27- Guttenberg
___ June 29- Monona
___ June 30- Strawberry Point

Mail this application, completed medical form and check made out to ISU Extension and Outreach to:

ISU Extension & Outreach - Clayton
PO Box 357
Elkader, IA 52043

PAYMENT- $15 first camp per child
$10 each additional camp per child
Scholarships are available upon request.

The fee for service is used to off-set direct expenses & to support the Clayton County Extension 4-H & Youth Program.

Do Not Return This Registration Without The Medical Release Form.
# Iowa 4-H Medical Information/Release Form
## Youth Participant Form

### PARTICIPANT INFORMATION

<table>
<thead>
<tr>
<th>Participant's Name</th>
<th>Date of Birth</th>
<th>Gender</th>
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<tr>
<th>Permanent Address</th>
<th>Home Phone</th>
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<tr>
<th>City, State, Zip</th>
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### MEDICAL EMERGENCY CONTACT INFORMATION

<table>
<thead>
<tr>
<th>Person to Contact First</th>
<th>Backup Contact (Relative or Friend)</th>
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<tbody>
<tr>
<td>Name</td>
<td>Name</td>
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<table>
<thead>
<tr>
<th>Relation to Participant</th>
<th>Daytime Phone</th>
<th>Home Phone</th>
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<tbody>
<tr>
<td></td>
<td>Daytime Phone</td>
<td>Evening Phone</td>
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<td></td>
<td>E-mail</td>
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<tr>
<th>Name of Family Doctor</th>
<th>Office Number</th>
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<th>Name of Dentist</th>
<th>Office Number</th>
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### INSURANCE POLICY INFORMATION

The above-named participant is covered by health insurance. **Yes**  **No**

* If no, initial this line stating that you do not have health insurance and are aware that Iowa State University/University Extension/4-H does not carry any health insurance for you.

* If yes, provide the following information which is required by Iowa State University to expedite treatment and to facilitate the billing process.

<table>
<thead>
<tr>
<th>Policy Holder’s (P.H.) Name</th>
<th>P.H.’s Date of Birth</th>
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<table>
<thead>
<tr>
<th>Address</th>
<th>Relation to Participant</th>
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<tr>
<th>City, State, Zip</th>
<th>Occupation</th>
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<table>
<thead>
<tr>
<th>P.H.’s Employer’s Name/Address</th>
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<thead>
<tr>
<th>Insurance Company Name</th>
<th>Policy #</th>
<th>Plan #</th>
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### HEALTH INFORMATION *(Please Print)*

Does the child have any of the following conditions or a history of any of the following conditions? *(Check all that apply.)*

- □ Asthma
- □ Bronchitis
- □ Fainting Spells
- □ Diabetes
- □ Ear Infections
- □ Heart or cardio-vascular problems/disease
- □ Convulsions/seizure
- □ Hay Fever
- □ Chronic bone, muscle or joint injuries
- □ Migraine headaches
- □ Other condition(s): *(Please list)*

Allergies or reactions: *(Check all that apply.)*

- □ Aspirin
- □ Penicillin
- □ Dairy
- □ Gluten
- □ Peanuts
- □ Insect bites or stings
- □ Ivy/oak/sumac toxins
- □ Other (list)

Is your child currently on any prescribed or over-the-counter medication? *(If so, please record the condition/ailment, name of medication, dosage, time(s) of day, prescribing physician.)*

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Date of last tetanus shot *(approximate if necessary):* __________________________

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*over*
RELEASING A child from liability arising out of their sole negligence.

I hereby give permission for my child to participate in any 4-H program. This release, however, is not intended to release the above-listed entities from any of their responsibilities in the event of injury, loss, penalties, damage, settlement, costs or other expenses or liabilities that occur as a result of my child's participation in the 4-H program. I assume the risk of participating. I understand that 4-H program activities/events may involve certain risks of physical activity and possible injury and that Iowa State University and its 4-H program will provide each participant with reasonable care, but that ISU cannot guarantee that my child will remain free of injury. In addition, some 4-H projects involving high risk of injury, such as shooting sports, may require participants to wear protective gear. Other 4-H projects involving higher risk of injury, such as riding horses or cattle, may require participants to wear protective gear. I agree to RELEASE from LIABILITY, INDEMNIFY and HOLD HARMLESS the State of Iowa, the Board of Regents of the State of Iowa, the Iowa State University, the Iowa State University Extension and Outreach, the Iowa 4-H Program, and any and all other Missouri or Iowa State universities, colleges, or other educational institutions, that may operate, manage, or provide the services associated with the Iowa 4-H Program and any and all other organizations, persons, or entities that are related in any manner to the Iowa 4-H Program, from any and all claims and/or causes of action arising out of and related to any injury, loss, penalties, damage, settlement, costs or other expenses or liabilities that occur as a result of my child's participation in the 4-H program.

I understand that: 4-H projects including but not limited to: shooting sports, horse or livestock projects, water activities, and other sporting activities have a higher degree of risk. I nonetheless wish to have my child participate in the 4-H program and ASSUME the RISK of participating. I agree to RELEASE from LIABILITY, INDEMNIFY and HOLD HARMLESS the State of Iowa, the Board of Regents of the State of Iowa, the Iowa State University, the Iowa State University Extension and Outreach, the Iowa 4-H Program, and any and all other Missouri or Iowa State universities, colleges, or other educational institutions, that may operate, manage, or provide the services associated with the Iowa 4-H Program and any and all other organizations, persons, or entities that are related in any manner to the Iowa 4-H Program, from any and all claims and/or causes of action arising out of and related to any injury, loss, penalties, damage, settlement, costs or other expenses or liabilities that occur as a result of my child's participation in the 4-H program.

I give permission for to participate in the 4-H program. I understand that 4-H project activities/events may involve certain risks of physical activity and possible injury and that Iowa State University and its 4-H program will provide each participant with reasonable care, but that ISU cannot guarantee that my child will remain free of injury. In addition, some 4-H projects involving high risk of injury, such as shooting sports, may require participants to wear protective gear. Other 4-H projects involving higher risk of injury, such as riding horses or cattle, may require participants to wear protective gear. I agree to RELEASE from LIABILITY, INDEMNIFY and HOLD HARMLESS the State of Iowa, the Board of Regents of the State of Iowa, the Iowa State University, the Iowa State University Extension and Outreach, the Iowa 4-H Program, and any and all other Missouri or Iowa State universities, colleges, or other educational institutions, that may operate, manage, or provide the services associated with the Iowa 4-H Program and any and all other organizations, persons, or entities that are related in any manner to the Iowa 4-H Program, from any and all claims and/or causes of action arising out of and related to any injury, loss, penalties, damage, settlement, costs or other expenses or liabilities that occur as a result of my child's participation in the 4-H program.

I give permission for my child to be transported during an authorized activity or event. I give my permission for: [ ] My child to drive his/her vehicle to 4-H activities. [ ] My child to ride with any adult volunteer driver. [ ] My child to ride with an authorized adult volunteer driver who has completed an MVR check. [ ] My child to ride in another youth's (18 or younger) vehicle. [ ] My child to transport other 4-H participants in his/her or my vehicle. [ ] My child to ride with an authorized adult volunteer driver who has completed an MVR check. [ ] My child to ride in another youth's (18 or younger) vehicle. [ ] My child to drive his/her vehicle to 4-H activities. [ ] My child to ride with any adult volunteer driver. [ ] My child to ride with an authorized adult volunteer driver who has completed an MVR check. [ ] My child to ride in another youth’s (18 or younger) vehicle. [ ] My child to transport other 4-H participants in his/her or my vehicle.

TO BE READ AND SIGNED BY PARTICIPANT

My understanding of the legal provisions of this form and the sharing of information with others.

I understand that my child must be healthy and reasonably fit in order to safely participate in 4-H recreation activities and that I will inform the program leader(s) of any medication, ailment, condition, or injury that may affect his/her ability to participate safely. I understand that my child must be healthy and reasonably fit in order to safely participate in 4-H recreation activities and that I will inform the program leader(s) of any medication, ailment, condition, or injury that may affect his/her ability to participate safely.

MEDICAL EMERGENCY PARENTAL PERMISSION

I understand that my child must be healthy and reasonably fit in order to safely participate in 4-H recreation activities and that I will inform the program leader(s) of any medication, ailment, condition, or injury that may affect his/her ability to participate safely. I understand that my child must be healthy and reasonably fit in order to safely participate in 4-H recreation activities and that I will inform the program leader(s) of any medication, ailment, condition, or injury that may affect his/her ability to participate safely.

PUBLICITY/IMAGE/VOICE PERMISSION

I agree to the release of any record necessary for treatment, referral, billing or insurance purposes. I understand that I hereby give permission to the ISU Extension staff or volunteer to provide routine first aid and seek emergency treatment including x-rays or routine tests. I agree to the release of any record necessary for treatment, referral, billing or insurance purposes. I understand that I hereby give permission to the ISU Extension staff or volunteer to provide routine first aid and seek emergency treatment including x-rays or routine tests. I agree to the release of any record necessary for treatment, referral, billing or insurance purposes. I understand that I hereby give permission to the ISU Extension staff or volunteer to provide routine first aid and seek emergency treatment including x-rays or routine tests.