

# Summer 2019

## Upcoming Events led by Tama County 4-H



Date	Time	Location	Camp Theme	Grades (completed)	RSVP by	Cost
June 7	Noon to 6:00 p.m.	Toledo Public Library	Babysitting Basics Clinic	5-8	June 3	\$10
June 11	9:00 a.m. to 3:30 p.m.	Otter Creek Lake & Park	Youth Fishing Camp	3-6	June 5	FREE
June 14-15	5 p.m. (6/14) to 5 p.m. (6/15)	Otter Creek Lake & Park	Overnight Camp	4-6	May 24	\$40 if enrolled 4-H member \$50 if non-4-H member
June 19-21	9 a.m. to noon	Otter Creek Lake & Park	Critter Camp	K-3	June 10 To register contact 641-484-2231 or lroberts@tamacounty.org	\$15
June 24	9 a.m. to 3 p.m.	Traer Park Shelter	Art in the Park	K-3	June 18	\$10
June 28	9 a.m. to 3 p.m.	Tama Park Shelter	Art in the Park	K-3	June 18	\$10
July 1	9 a.m. to 3 p.m.	Garwin Park Shelter	Art in the Park	K-3	June 18	\$10

For descriptions of all camps, visit [www.extension.iastate.edu/tama](http://www.extension.iastate.edu/tama) or call 641-484-2703 or email [jhulme@iastate.edu](mailto:jhulme@iastate.edu)

The fees for service will be used to offset direct expenses of the program. Full refunds will be issued if a camp is cancelled due to low registrations. No refunds will be given for participants that cancel after the registration date.



## Join us at the Libraries!

It's all about rockets!

Tama Public Library (6/4)

Gladbrook Public Library (6/5)

Traer Public Library (6/5)

Chelsea Public Library (6/12)

Dysart Public Library (6/13)

Toledo Public Library (6/18)

Garwin Public Library (6/18)

Clutier Public Library (7/24)

Elberon Public Library (date to be determined)

**Tama County** 203 West High Street, Toledo, IA 52342

[www.extension.iastate.edu/tama](http://www.extension.iastate.edu/tama)

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Direct inquiries to the Diversity Advisor, 515-294-1482, [extdiversity@iastate.edu](mailto:extdiversity@iastate.edu).

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Complete this form & return with payment to ISU Extension and Outreach—Tama County

203 West High Street, Toledo, IA 52342 (Checks payable to Tama County Extension)

**Circle the camp you are registering for:**

- |  |                          |                           |
|--|--------------------------|---------------------------|
| Babysitting Basics                             | Fishing Camp             | Junior Overnight Camp     |
| Art in the Park in Tama                        | Art in the Park in Traer | Art in the Park in Garwin |
| Crittter Camp—Contact 641-484-2231 to register |                          |                           |

Child's Name: \_\_\_\_\_

Completed Grade: \_\_\_\_\_ (circle one) Boy or Girl

Parent/Guardian Name(s): \_\_\_\_\_

Email: \_\_\_\_\_ Phone # \_\_\_\_\_ Alt. Phone # \_\_\_\_\_

Emergency Contact Name(s): \_\_\_\_\_ Emergency Phone # \_\_\_\_\_

Please list any allergies & medical conditions \_\_\_\_\_

**Publicity/Image/Voice Permission**

The Iowa State University Extension 4-H Program normally takes photographs, video, and/or tape recording of our programs. During activities, a photography or video/audio recording may be taken of you or your child. Unless you request otherwise, your initial below will be considered permission for Iowa State University and the 4-H Program to photography, film, audio/video tape, record an/or televise your image and/or voice or the image and/or voice of your child for use in any publications or promotional materials, in any medium now known or developed in the future without any restrictions. If you object to ISU using you or your child's image or voice in this manner, please notify the adult leader. \_\_\_\_\_ Initial \_\_\_\_\_ Date

**4-H Assumption of Risk and Release of Liability (Please read carefully)**

I give permission for my child to participate in the 4-H program. I understand the 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 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, ISU and ISU Extension and their officers, employees and agents (hereinafter the RELEASES) from any and all claim and/or cause 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. This release, however, is not intended to release the above-mentioned RELEASES from liability arising out of their sole negligence. \_\_\_\_\_ Initial \_\_\_\_\_ Date

**Medical Emergency Parental Permission**

The health history for my child is correct and complete to my knowledge. If an injury or other medical condition occurs or arises, I hereby give permission of the ISU Extension staff or volunteer to provide routine first aid and seek emergency treatment including x-rays or routine tests. I agree to release of any record necessary for treatment, referral, billing or insurance purposes. I understand that I am financially responsible for charges and hereby guarantee full payment to the attending physicians or health care unit. In the event of an emergency where I cannot decide for my child, I give permission to the physical/hospital selected by the ISU Extension staff or volunteer to secure and administer treatment for my child, including hospitalization. (\*If you cannot sign this section of the form for any reason, contact the County Extension Director regarding a legal waiver in order to attend and participate) \_\_\_\_\_ Initial \_\_\_\_\_ Date