2017 Fairfield County 4-H Camp Registration, Scholarship Request and Cabin Friend Request

OFFICE USE: Check #	Cash \$ D	ate Received:	M	Scholar F	Letter Photo R	R# elease Y N	
I wish to enroll my 4-H'er in	the following camp (c	hack one):					
Junior Camp June 30-July 3 Age		ges 11-14 (Age as of Jan. 1 ges 8-10 (Age as of Jan. 1) ges 5-8 (Age as of Jan. 1)	1)	gular Registra \$115.00 \$115.00 \$25.00	tion Late Reg	Late Registration after June 1 \$125.00 \$125.00 \$35.00	
THE REGISTRATION DEAD Camp-July 3). Once registrat	LINE IS A WEEK PRIO	R TO THE START OF EAC	CH CAMP! (Inte	rmediate Car	mp-June 5; Junior Camp		
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Please make checks payable to: OSU Extension Fairfield County TOTAL \$ NOTE: There is a \$30.00 charge for all returned checks!							
Member's Name				Age (Jan 1) Male	Female	
AddressCity						Zip	
Phone	ne Email Address			(to receive camp info electronically)			
4-H Club/School					T-Shirt Size		
Parent/Guardian Signature	e						
Please list any special dietary needs:							
Bertha Wils	on Camp Scholarsh	in Request MUST be r	eceived by J	une 1 (2017	Scholarship Amou	nt is \$48.25)	
Bertha Wilson Camp Scholarship Request MUST be received by <u>June 1</u> (2017 Scholarship Amount is \$48.25) <u>Explanation for Request</u> (select one per camper)							
Financial Need							
Receives Free or Reduced School Lunches School Name							
Special Need (Explain Need Below)							
Multi Camper Family Tuition (two or more campers wanting to attend camp)							
Number of 4-H members in the same immediate family attending camp							
First Year Camp	er attending Junior C	OR Intermediate Camp					
Explanation of Need							
		4-H Cabin Fri	end Red	guest			
We know the importance of be put with a certain 4-H from cabins upon arriving at car Cabin Friend Requests' management in the signatures and phone number honored, but we will of the signatures are signatures.	of friends to share an iend will be assigned inp! Campers are on ust be received by the labers. They will not be	experience and a cabin a cabin. No campers of a cabin. No campers of allowed to choose of a catension Office (not be accepted after the de	at 4-H Camp choosing the ' ² one friend (for postmarked) <u>b</u>	Tar Hollow. 4-H Camp F r a total of 2 by June 1st	riend Request' will be 2 in a cabin) to signa with ALL campers na	e able to change -up with. All '4-H ames, parents	
Cabin Preference Declara	ation						
Camp Attending (Circle C	ne) Intermediat	te Junior	(so	rry, this is no	ot an option for Clove	rbud Camp)	
Name of Child	Parent's Signature			Phone			
Name of Child	ne of Child Parent's Signature			Phone			
DO NOT ADD ANY ADDI	ΓΙΟΝΑL LINES! 2 CA	AMPERS ONLY!	Only one fo	rm is need	ed per pair of cabin	friends	

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