**Racine County 4-H Winter Camp**

**Camper Registration Form 2018**

**What:** Racine County 4-H Winter Camp

**Who:** Racine County 4-H members who are in 9th grade and above during the 2017-2018 school year

**When:** 6:00 p.m. on Friday, February 9th, 2018 until 11:00 a.m. on Sunday, February 11th, 2018

**Where:** Lake Geneva Youth Camp, W2655 South Street, Lake Geneva, www.lgyc.org

**Cost:** $60 per camper

**What is Winter Camp?** A variety of activities and learning experiences await winter campers, including tubing, tobogganing, broomball, giant swing, teambuilding course, and other outdoor and indoor games. No matter what the weather brings, camp is organized so youth encounter a variety of new experiences, learn life skills, and develop new friendships!  
  
Capacity is limited and will be first-come first-served.

**This form and payment is due on Monday, January 15, 2018 at 4:30 p.m.** It may be dropped off in person at the Burlington office (209 North Main Street, Burlington) on weekdays between 8:00 a.m.-12:00 p.m. or 12:30-4:30 p.m. by the stated date and time, placed in the drop box on the south side of the Burlington office by the stated date and time, or postmarked via USPS mail by the stated date. ***Late forms will not be accepted.***

**Racine County 4-H Winter Camp**

##### OFFICE USE ONLY

Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Amount Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Check #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Registration Deadline

Monday, January 15, 2018

4:30 p.m.

*See options above.*

**Camper Registration Form 2018**

**ONE CAMPER PER FORM (PLEASE PRINT)**

Full Name:

Grade (2017-2018 School Year): Age: Gender:

E-mail Address: Phone:

Club: List any food allergies:

Emergency Contact Name: Emergency Contact Number:

List cabin buddy requests below. Please know that these requests cannot always be accommodated.

1st 2nd

**Please be sure the camper’s health form is accurate and signed with the current date in 4HOnline by 4:30 p.m. on Monday, January 15th, 2018.** Make checks payable toRacine County 4-H Leaders Association.

**I give my permission for this camper to participate in Winter Camp, February 9-11, 2018.   
Signature of Parent or Guardian: Date:**

**Parents/Guardians:**

**Are you interested in chaperoning this program overnight?** Yes No \_\_\_\_\_\_   
**Name:**

**I am a registered 4-H volunteer:** Yes No **I am willing to be the camp nurse:** Yes \_\_\_\_\_\_ No

*(In order to hold the program, we will need one adult chaperone, who is a registered volunteer, age 21+, for every 10 participants.)*

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