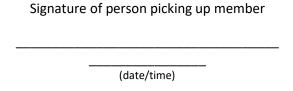
OHIO STATE UNIVERSITY EXTENSION

Ca	amp Rules Agreement	
I understand that I,	ugs, or firecrackers while at camp. I also agree that I will not bring them to camp. I agree that I will not up Director. I will conduct myself with respect for one cabin areas are restricted to boys in the boys' calcople's property and camp property and agree not not up and way which causes inconvenience to	at camp is not a place for leave the campgrounds thers at all times and will abin area and girls in the
I understand that 4-H Camp is a fun place to be for property and when other youth respect my right to a property, and right to enjoy camp. If I break any part of this agreement, I understand the will be sent home without a refund of my fees and a series of the sent home without a refund of my fees and a series of the sent home without a refund of my fees and a series of the sent home without a refund of my fees and a series of the sent home without a refund of my fees and a series of the sent home.	chat my parents will be called immediately, and I at my own expense. e my photo likeness for camp programs such as	RESPECT Respect everyone and everythin THINK Understand and demonstrate IMAGINE Be creative and dream! SPIC & SPAN Clean up after yourself and tab
Youth/Camper Signature Note: 4-H Camp concludes promptly at 9:00	a.m., Monday, June 9. All campers should be	TARGET Follow directions to stay on target
4-H Member Restricted Release/Optional Early Release Complete this form to confirm arrangements and/or authorize another person to pick up a 4-H youth member. Supervision at 4-H Events where 4-H Professionals and Authorized Volunteers take responsibility for 4-H youth members in the absence of the parents/guardian is of highest importance. Full time participation is required at 4-H		person(s) listed below to pick up (name of event) ne
events unless prior permission is granted by	If the youth is granted permission to leave the event early, or	omplete these details:



the County 4-H Professional.

the youth member to the 4-H

below.

Before release of the youth member the person(s) listed above must be identified by

Professional/Volunteer in charge and sign

l,	, herby authorize only the person(s) listed below to pick up
(name parent/guardian)	, herby authorize only the person(s) listed below to pick up
	from
(4-H youth member name)	from (name of event)
Name of person(s) authorized to pi	ick up my child:
1	Phone
2	Phone
☐ Return date/time ☐ Will not return to event	
☐ Return date/time ☐ Will not return to event If a change is needed to this author	
☐ Return date/time ☐ Will not return to event If a change is needed to this author	rization, I understand that I must call:
☐ Return date/time ☐ Will not return to event If a change is needed to this author	rization, I understand that I must call:



