

Stanislaus County 4-H
Primary Camp-Kiwanis Camp, LaGrange - May 18-19, 2019
Club Summary Form

Club Name

Leader in charge of camping activity: _____

Phone: _____

Camp fee is \$10 – per staff, member, parent or sibling. Make check payable to: **Stanislaus County 4-H Camp**

- We are enclosing Camp Fees in the sum of \$ _____.

Each staff, member, parent, and/or sibling completes the Primary Camp registration form which includes medical forms and code of conduct forms. All camp money and forms are due in the 4-H Office on or before Wednesday, **May 1st, 2019.**

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The following 4-H Club members will attend 4-H Primary Camp in LaGrange:

Please List everyone planning on attending (please print). (Include their registration form)

	Name	Age	Sex	Telephone	(Check one)				\$ Paid
					Staff	Member	Sibling	Parent	
1.									
2.									
3.									
4.									
5.									
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9.									
10.									
11.									
12.									

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	Name	Age	Sex	Telephone	(Check one)				\$ Paid
					Staff	Member	Sibling	Parent	
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14.									
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PLEASE LIST MEMBERS APPLYING AS COUNSELORS

	Name	Age	Sex	Telephone	(Check one)				\$ Paid
					Staff	Member	Sibling	Parent	
1.									
2.									
3.									
4.									
5.									

- Comments from leader in charge of camping activity: