

4-H Summer Camp at Rock Eagle

June 10-14, 2024

Cost: \$400.00

\$100.00 non-refundable deposit due at sign-up

Cash, check or money order accepted for deposit.

We will not be able to make change for cash payments

EARLY SIGN-UP

ONLY FOR DISTRICT PROJECT ACHIEVEMENT (DPA) PARTICIPANTS:

Saturday, March 16 following DPA at MES/MMS

Monday, March 18-Tuesday, March 19

8:00-12:00, 1:00-5:00 at Candler County 4-H Office

REGULAR SIGN-UP:

Begins Wednesday, March 20

8:00-12:00, 1:00-5:00 at Candler County 4-H Office

SPACE IS LIMITED AND WILL BE FILLED ON A FIRST COME, FIRST SERVED BASIS
SCHOLARSHIP APPLICATIONS DUE AT CAMP SIGN-UP
KRISPY KREME FUNDRAISER ORDERS DUE BY MARCH 31
PAYMENT PLANS ARE AVAILABLE



WHAT WE DO AT CAMP

- *Tribal Shield, Variety Show, Trivia, Rock Eagle Pageant
- *Stay in cabins
- *Canoeing, Sailing, Swimming, Water Slide, Wet Games
- *Climbing Wall, Zipline, Lake Ecology, Herpetology,
- *Sports, Archery, Games, Dancing, Nature Hikes
- *Crafts, Campfires
- *Snacks and Souvenirs at Canteen
- *And much, much more!

RECOMMENDED PAYMENT PLAN (\$400 TOTAL)

\$100 DEPOSIT DUE AT SIGN-UP: BEGINNING IN MARCH

\$100 PAYMENT: APRIL 15

\$100 PAYMENT: MAY 10

\$100 PAYMENT: MAY 31

FUNDRAISERS AND SCHOLARSHIPS MAY REDUCE THE AMOUNT OWED AFTER DEPOSIT



Candler County 4-H

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Office Hours: Weekdays 8-12 & 1-5 (closed 12-1 for lunch)



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Candler County 4-H Cloverleaf Summer Camp Registration

Complete this registration form and return with a non-refundable deposit of **\$100.00** to the 4-H office at camp sign-up (dates are listed on other side of application). Space is available on a first come, first served basis.

Remaining balance due by **Friday, May 31**. *You will forfeit your spot if you fail to pay in full by this deadline.*

Please print clearly, we will send reminders through email periodically, so please put an email that you check frequently.

Name of 4-H'er: _____ School _____

Age: _____ Grade: _____ Birthdate: ___/___/___ Gender: M F

Phone #1: _____ Phone #2: _____

Address: _____

City: _____ Zip: _____

Parents/Guardian Name: _____

Parent/Guardian E-mail #1: _____

Parent/Guardian E-mail #2: _____

Special Needs: _____
(special needs can include allergies, dietary, medical, medication, etc.)

4-H'er T-Shirt Size: YM YL AS AM AL AXL AXXL

Can 4-H'er swim? Yes No

Sign the following statement:

I understand that this application and a \$100.00 non-refundable deposit are due to the 4-H office at the time of sign-up. The remaining balance of \$300.00 is due by **Friday, May 31** and if not paid by this date my child will lose his/her spot and be replaced by another 4-H'er. Camper fees cannot be refunded without a written doctor's excuse.

Parent/Guardian Signature: _____ Date: _____

Adult volunteers may be needed for 4-H camp. If you are interested in serving as an adult volunteer for camp, please complete the following and we will be in touch

Name of Adult Interested in Volunteering for 4-H Camp: _____

Email: _____ Phone #: _____