

4-H Summer Camps at Rock Eagle

Senior Camp

June 24 - 28, 2024

Total Cost: \$435



A week of adventure & fun!

4th of July Celebration • Game Room
Exciting Workshops • Tribal Competitions
& MUCH MORE!

**Registration begins
Tuesday, February 27**

8am - 12pm / 1pm - 5pm

**UGA Extension 4-H Office
601 N. Laurel Street - Springfield**

SENIOR XTREME

June 10 - 14, 2024

Total Cost: \$435



A week of adventure & fun!

Fishing • Night Hikes • Zip Line • Canoeing
Tree Climbing • Shotgun • Camping • Archery
& MUCH MORE!

*Spaces are limited and filled on a first
come, first serve basis*

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*Camp Application and \$150 Deposit
due at time of registration*

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*Credit Card, Check, or Money Order
accepted*

Price includes all camp activities, transportation, meals while at camp, 4 nights lodging



UGA Extension Effingham County

An Equal Opportunity, Affirmative Action, Veteran Disability Institution

OFFICE USE ONLY! Amount of Deposit: _____ Payment Type: _____ Application # _____

Registration for 4-H Summer Camp begins **Tuesday, February 27 at the Effingham 4-H Extension Office**. You will need to bring a **Completed Application** and **\$150 Deposit per camp attending**. Camp Registration is *first come, first served* and spaces are limited!

Balance due by 5pm on Monday, May 6, 2024

4-H CAMPER INFORMATION

2023-2024 Grade: 9th 10th 11th 12th School _____

Name: _____

Gender: M F Race: _____ (optional) Age: _____ Birthdate: ____/____/____

Mailing Address: _____

City: _____ Zip: _____

T-Shirt Size: YS YM YL AS AM AL AXL AXXL Can 4-H'er swim? Yes No

Special Needs or Health Concerns : _____

PARENT/GUARDIAN CONTACT INFORMATION

Parent / Guardian Name: _____

Parent/Guardian Cell Phone: _____

Additional Phone: _____

Parent/Guardian Email address: _____
(please print clearly, we will send reminders through email periodically, so please put an email that you check frequently)

Please select which camp(s) you will be attending this Summer and the total cost.

Senior Camp (June 24-28, 2024)..... Price: \$435

Senior Extreme (June 10-14, 2024).....Price: \$435

Total Cost of Camp(s): _____

Please sign the following statement:

I understand that this application and a \$150 **NON-REFUNDABLE** deposit **per camp attending** is due to the Effingham 4-H Office for camp registration. The remaining balance and *all forms* are due **Monday, May 6**. If not paid by this date my child may lose their spot and be replaced by another 4-H'er. Once the balance is paid, it cannot be refunded without a written doctor's excuse. **Summer school is not an excuse for refund.**

Parent/Guardian Signature: _____ Date: _____

Camp Forms & Final Balance DUE: by 5pm on Tuesday, May 6, 2024

Visa & Master Card Credit Cards are accepted. Payment plans are available upon request.
If you fail to pay your balance by May 6 your child's name will be removed from the camp list.