



2023 Thumb Area 4-H Camp Registration Form



June 27-29, 2023



**Registrations due
May 26, 2023**

At Camp Stapleton
25 miles north of Port Huron



3753 Lakeshore Rd., Lexington MI, on Lake Huron

Our goal is to help youth experience nature in an exciting and memorable way, while developing their independence, confidence and friendships.

Program: Offers an opportunity for 4-H'ers to share experiences in camping with activities including Great Lakes ecology, swimming, archery, teambuilding, skits, games and crafts, and much more. Camp Stapleton is located on beautiful Lake Huron. Located just 25 miles north of Port Huron.



- Youth must be ages 9-14 as of January 1, 2023.
- Cost is \$135 for youth currently enrolled in 4HOnline.
- Not enrolled? Enroll for FREE at <https://v2.4honline.com>.
- Select Huron County and Thumb Area 4-H Camp Club.
- Need assistance, please contact your local MSU Extension Office.
 - **Deadline to register is Friday, May 26, 2023.**
 - **LATE REGISTRATIONS WILL NOT BE ACCEPTED.**

Discover Yourself
in 4-H
at
Camp!

➤ Adult male & female chaperones are also needed, please contact your county MSU Extension Office and find out how to volunteer:

Huron County (989) 269-9949
 St. Clair County (810) 989-6935
 Sanilac County (810) 648-2515
 Tuscola County (989) 672-3870



MICHIGAN STATE
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In cooperation with, Huron, St. Clair, Sanilac and
Tuscola County MSU Extension 4-H Programs



THANK YOU Sponsors of the 2022 Thumb Area 4-H Camp

Platinum Sponsors:

Agri-Valley Communications, dba Pigeon Telephone, Thumb Cellular, Agri Valley Services & AVS Tech Team	GreenStone Farm Credit Services	J.W. Hunt, OTC
Greater Huron County United Way	St. Clair County Farm Bureau	Tri-County Equipment (Sandusky)
Sanilac County Farm Bureau		
Westside Sand Products, Inc.		

Gold Sponsors:

Cass City Oil & Gas, Company	Cooperative Elevator Company	Hills & Dales General Hospital
Huron County Dairy Promotions	Lake Huron Financial	McLaren Thumb Region
Steiner Tractor Parts, Inc.	Thumb Crop Insurance	Tuscola County Farm Bureau

Silver Sponsors:

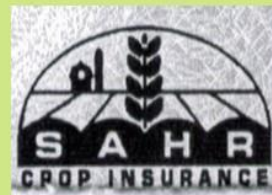
Bay Port State Bank	Case Surveying	Corteva AgriSciences
East Huron TV & Appliance	Finan & Schmidt Agency, Inc.	Flannery Auto Mall
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Len's Pool & Spa, Inc.	M3 Wireless, Inc.	Maurer Electric, Inc.
McVey Insurance Agency	Michael Sahr Crop Insurance Agency	Ordus-Ford, Inc.
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Friends of 4-H:

Eilber Insurance Agency	Huron's Finest	Team One Credit Union
Thumb Anesthesia	Thumb Energy Services	Walsh Packing Company



GABRIEL B. HOLDWICK, D.D.S.



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Thumb Area 4-H Camp Registration Form

Youth Ages 9-14 as of 1/1/2023



REGISTRATION PACKET

RECEIPT BOX - FOR INTERNAL USE ONLY:

_____ Date payment received _____ Check number or CASH
_____ Receipt number issued _____ T shirt size

REQUIRED FORMS CHECKLIST:

These forms are to be filled out **with ALL required signatures** and turned in with payment for registration. Please double check you have done everything listed below.

- In Case of Emergency Info
- Personal Data/Registration Sheet **PHOTO REQUIRED**
- Parent/Guardian Permission Form
- Youth must be currently enrolled in 4HOnline. Not enrolled? Join for FREE at <https://v2.4honline.com> select Huron County and Thumb Area 4-H Camp Club**
- Check payable to: **"Thumb Area 4-H Camp"**
- Mail to: **MSU Extension-Huron County
1142 S. Van Dyke
Bad Axe, MI 48413**
- Registration DEADLINE is Friday, May 26, 2023 (Late registrations WILL NOT be accepted!)**

RETURN THIS TOP PORTION WITH APPLICATION & PAYMENT



TEAR OFF & KEEP THIS SECTION FOR YOUR INFORMATION.

In case of an emergency requiring you to contact your child during the event, contact:

St. Clair County = Office (810) 989-6935 or Lori Warchuck (810) 990-9230

Huron County = Office (989) 269-9949 or Patti Errer (989) 550-2971

Sanilac County = Office (810) 648-2515 – Mary Heiden

Tuscola County = Office (989) 672-3870 - Katie Cooper

Please Note - some of these are staff's cell phones and are NOT to be given out or used any other time EXCEPT during Thumb Area 4-H Camp! Thank you for protecting their privacy.

Camp Stapleton
3753 Lakeshore Road
Lexington, MI 48450

CHECK INTO CAMP

TUESDAY, JUNE 27, between 10:00 - 10:30 A.M.

CHECK OUT

THURSDAY, JUNE 29, at 11:00 A.M.

IN CASE OF EMERGENCY

4-H Camper's Name _____

Parent Name(s) _____

Address _____

Dad's Number _____ Mom's Number _____

Name of Person to Notify If Parent is not available:

Address _____

Contact Number _____

A confirmation letter, along with your receipt, will be mailed out at least three weeks prior to Thumb Area 4-H Camp to all registered participants; this is to ensure that you receive it in a timely manner.

WHAT TO BRING:

1. Sleeping bags or blankets & sheets, and a pillow;
2. Toiletries;
3. Swimsuit, towel **AND** water shoes or old tennis shoes;
4. Sunscreen **LOTION** (not aerosol spray);
5. Insect repellent (not aerosol spray);
6. Flashlight (**NO laser lights**);
7. Tennis shoes (**NO SANDALS OR FLIP FLOPS**);
8. Jacket/sweatshirt; and
9. **PLEASE label your belongings!**

DO NOT TO BRING:

- Valuable articles, such as **cell phones, iPhones, radios, jewelry, money, etc.**
- **If you bring a cell/iphone to 4-H Camp and you are found with it, it will be confiscated and returned to your parents at the end of 4-H Camp.**



THUMB AREA CAMP PERSONAL DATA/REGISTRATION SHEET



Child's Name _____
 County _____ 4-H Age (as of 1/1/23) _____ Current Age _____
 Gender _____ Height _____ Weight _____
 Parent Email _____

PASTE

PHOTO HERE

(REQUIRED) - Focus on the Face like a passport photo)

T-SHIRT SIZE: Please circle which ADULT size your child will use
 Small Medium Large X-Large XX Large
 XXX large (\$5 fee extra – please add the extra fee to your registration fee)

CABIN BUDDY: If you wish to request **ONE** cabin buddy please provide name here: _____

This same person will need to request it on their form too. **NO CHANGES** will be made at camp.

COST: \$135 for Current 4-H Members \$_____

CHECKS PAYABLE TO: **Thumb Area 4-H Camp**

REGISTRATION DEADLINE: Tuesday, May 26, 2023 (LATE REGISTRATIONS WILL NOT BE ACCEPTED)

MAIL APPLICATION AND PAYMENT TO: MSU Extension-Huron County, 1142 S. Van Dyke Bad Axe, MI 48413

DIET:

Is your child on a special diet? If so please explain _____
 To make special arrangements, please contact us at least two weeks prior to camp. Attach a detailed list of allowed and prohibited foods for the nurse and staff.

CONFIDENTIAL INFORMATION:

Please provide information which might be helpful to the staff in providing the most positive camp experience possible such as recent changes in family relationships, learning/behavior issues, issues that are positively or negatively affecting your child at this time. This information will be kept confidential.

Is your child having difficulty with any of the following conditions? Asthma, convulsions, skin rash, constipation, sleep walking, bed wetting or other _____

RELEASE INFORMATION:

My child may be released from camp to the following persons (include relationship) in addition to myself:

My child MAY NOT be released from camp to the following persons (include relationship)

PARENT/GUARDIAN PERMISSION FORM

1) OVERNIGHT HOUSING

I understand that my child (name) _____ will be attending Thumb Area 4-H Camp in Lexington MI, and that he or she may be sharing lodging with an unrelated adult (21 or older) who has been through the Michigan State University Extension Child Well-Being Volunteer Selection Process and with at least one other youth. By signing this form, I give my permission for my child to attend this event under these lodging conditions. I also understand the Michigan 4-H Code of Conduct expectations for adults and youth attending this event.

Signature of Parent/Guardian (required)

Date

2) OTHER MEDICAL RELATED NOTES

All medications (prescription and over the counter) must be given to the camp nurse at check in for dispensing at the designated times. All medications (exception-talk to the nurse regarding inhalers & EPI pens) must be sent in their original containers and labeled for this camper. Because of the number of meds dispensed, we are only able to give them at meals and bedtime unless it is critical, they be at another time (such as Ritalin, anti-seizure, etc.) Campers are responsible for reporting to the nurse for meds at the appropriate times. Here is a schedule of meds:

<u>Medication</u>	<u>Dose</u>	<u>Time dispensed</u>	<u>Only as Needed</u>	<u>Reason for meds</u>

The camp nurse stocks the following medications, please do not send additional amounts:

- Acetaminophen (Tylenol)
- Antacid
- Antibiotic Cream
- Calamine Lotion
- Cough Suppressant
- Decongestant
- Diphenhydramine (Benadryl)
- Hydrocortisone Cream
- Ibuprofen (Motrin)
- Imodium (anti diarrhea)

Check one: It is okay to give my child these meds if indicated per standard camp treatments.
 It is okay to use these medications, except _____
_____.

Signature of Parent/Guardian (required)

Date