2018 Multi-County 4-H N.O.V.A. Camp

Dear Parents & Guardians:

We are so glad you decided to let your child(ren) join us for the 2018 Multi-Co. 4-H N.O.V.A. Camp!

NOVA is an acronym for Nature, Outdoors, Viticulture and Agriculture and we have planned a week full of fun and education for all participants, youth and adults! This is **NOT** an overnight camp – just NOVA-focused activities each day of the week.

Each day will begin at the Upshur Co. Extension office (for local members) at 8:00am and we should be back at the office about 4:00pm. Lunch will be provided on Monday and Tuesday, but participants will need to bring a sack lunch on Wednesday, Thursday & Friday. (Coolers and ice water will be provided.)

The $5.00 (non-refundable) registration fee and all camp forms are due to the UPSHUR COUNTY EXTENSION OFFICE by Friday, July 20th for each person attending (youth and adults). *One check from each county is preferred.* The $5.00 registration fee *is for one or all days*, just let us know which day(s) the child(ren) will attend.

SOME IMPORTANT POINTS TO SAVE YOU & CAMP VOLUNTEERS TIME & FRUSTRATION:

- *Be sure to read and sign required release forms. Both Youth and adults serving as volunteers must also complete the release forms.*
- **Child Safety:** We are required to maintain an 8:1 ratio of adults to youth, so approved 4-H adult volunteers will be asked to come. Adults who are not approved 4-H volunteers will only be allowed to transport their own children – or others with a signed parent's release – and they will not be used in any more of a volunteer capacity with the youth, but they are welcome to participate. Program presenters do not have to be approved 4-H volunteers and will not be alone with youth at any time.
- **Be aware of camp start and pickup times** – ALL campers MUST be dropped off & picked up promptly. The phone numbers of two adults will be carried with us to contact as needed.
- **First Aid:** We will have a First Aid kit on hand, but will contact the adults immediately listed on the registration form if anything more serious occurs. Any medications (prescription & non-prescription) MUST be in their original container, and dosage information must be listed on the camp medical release form. An adult will be responsible for managing and dispensing.
- **Special Accommodations:** The N.O.V.A. Camp organizers strive to meet the individual needs of our campers, but everyone needs to be aware that due to the nature of this camp, we will be outdoors most of the time – and it's SUMMER in Texas. That said, *please indicate any special needs on the*

registration/release forms.

- **Dress Code:** Campers must wear comfortable clothing that follows the 4-H dress code (shorts must reach the tip of fingers). **Athletic or closed-toe shoes are preferred.** NO flip-flops or open back shoes – We'll be walking a LOT and cowboy boots don't really have good traction, so try to avoid them. Items NOT allowed – tops with spaghetti straps, halter type tops, shirts that reveal the midriff, excessively loose fitting pants/jeans, clothing advertising or referencing alcohol, drugs, violence or having a sexual content.
- **Cell Phones:** Camp organizers, volunteers and Camp Gilmont staff will NOT be responsible for loss or damage to electronic devices. We reserve the right to remove cell phones from campers if being used inappropriately or distracting from the activities. They will be secured and returned at the end of the day.
- **EMERGENCIES:** Each parent should secure the contact info for your county agent or a supervising adult volunteer. Camp leaders will have the registration forms with parent contact info. Please answer. ☺
- **Appropriate behavior:** The Texas 4-H Youth Development Program recognizes that positive discipline teaches and encourages the healthy development of a child's self-esteem. The Multi-Co. 4-H N.O.V.A Camp sets limits that are developmentally appropriate and consistently enforced. **Please review the code of conduct form with your camper.** Campers are asked to be respectful of each other's feelings and privacy. We have NO tolerance for bullying. (Bullying is "any intentional hurtful act, be it physical or mental.") We ask you to help us prevent bullying by talking with your camper before they come. It is important for the bullied child to speak out and let an adult know preferably while at camp. Please do not hesitate to contact your county agent if your camper waits until they get home to speak out.

TO BE TURNED IN TO THE UPSHUR COUNTY EXTENSION OFFICE no later than: *Friday, July 20th.*

Forms: (All Of These Forms Are Required) – *to be turned in with fees*

Extension Waiver/Medical Form

Camp Health/Medical Forms

Code of Conduct Form

Registration Form

$5 registration fee per person

THINGS FOR CAMPER TO BRING

- Bug spray
- Sun screen
- Money for lunch on Wednesday, Thursday & Friday

Clothing:

Every day: Comfortable walking shoes – sneakers preferred

Tuesday & Thursday: Swimming suit/Beach Towel **(females must wear a t-shirt over suit)**

Multi-County 4-H N.O.V.A Camp

Registration Form

Learn about Nature, Outdoors, Viticulture & Ag. with us!

July 30 – August 3, 2018

County: _____

Parent/Guardian Name(s): _____

Address: _____

Home Phone #: _____ Cell Phone #: _____

Emergency Contact Name & Phone #: _____

Email address: _____

1st Child/Adult Name: _____ Male OR Female

Age: (current) _____ Birthdate: _____

Check which days attending: ALL Mon. Tues. Wed. Thurs. Friday

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2nd Child/Adult Name: _____ Male OR Female

Age: (current) _____ Birthdate: _____

Check which days attending: ALL Mon. Tues. Wed. Thurs. Friday

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3rd Child/Adult Name: _____ Male OR Female

Age: (current) _____ Birthdate: _____

Check which days attending: ALL Mon. Tues. Wed. Thurs. Friday

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4th Child/Adult Name: _____ Male OR Female

Age: (current) _____ Birthdate: _____

Check which days attending: ALL Mon. Tues. Wed. Thurs. Friday

(If needed, include more children on the back of this form.)

Fee: $5.00 per person – both adults & youth (age 5 & above)

It's preferred for checks to be made to a county 4-H program and each county pay once to "Upshur 4-H County Council.

Each county can return all forms & fees to the Upshur County Extension office at 301 E. Butler, Gilmer, TX 75644.

Fees are NON-REFUNDABLE, but may be transferred to another youth

MEDICATION INFORMATION

Complete and present the consent below, signed by parent or legal guardian for administration of medication while the student attends camp.

1. Bring the medication **IN THE ORIGINAL BOTTLE** (prescription or over-the-counter), properly labeled as prescribed by law.
2. Present this form and the medication indicated on this form to the nurse upon arrival on campus and abide by his/her instructions for administration.
3. If more than one medication is to be administered, a separate form is to be completed and signed for each medication.

Medication Information For:

Name: _____ Birthdate: _____ Sex:____ F ____M

Church Group student came with: _____
(group name) (group city & state)

Name of Medication: _____

Purpose for Medication Use (allergies, asthma, antibiotic): _____

Form of Medication: ____ tablet/pill _____ capsule _____ liquid _ inhalation _____other (specify) _____

_____

Dosage (amount to be given): _____ How Often/What Time: _____

Remarks/Special Instructions: _____

As the parent/legal guardian of the above child, I hereby give permission for the camp nurse/administration to administer this medication to my child.

_____ _____ _____

Parent/Legal Guardian Signature | Phone Number – good for daytime & evening | Date

FOR OFFICE USE ONLY

Please initial each dose & indicate time given – include notes/comments on back if needed

Day	Date	Time-Dose #1	Time-Dose #2	Time-Dose #3	Time-Dose #4
Sunday					
Monday					
Tuesday	June 28, 2016				
Wednesday	June 29, 2016				
Thursday	June 30, 2016				
Friday					
Saturday					

RELEASE, WAIVER, AND AUTHORIZATION FOR MEDICAL TREATMENT

I, participant (or participant's parent/legal guardian if participant is under 18 years old) _____, authorize my child(s) (listed below) full participation in the **Multi-Co. 4-H N.O.V.A. Camp July 30 through August 3, 2018**, including related activities. I understand the activities are not without some inherent risk of injury. In consideration of my (my child's) right to participate in this activity I agree to release, waive, discharge, agree not to sue, and agree to hold harmless for any and all purposes **Camp Volunteers, Texas 4-H and Youth Development Program, Texas 4-H Youth Development Foundation, Texas Cooperative Extension**, Texas A&M University, The Texas A&M University System and its Board of Regents, and their officers, employees, agents, and volunteers (Releasees) from any and all liabilities, claims, or injuries, including death, that may be sustained while participating in this activity, including traveling to, from, and for the activity, or while on premises owned or controlled by Releasees, **including injuries sustained as a result of the negligence of Releasees**. I understand this release does not apply to injuries caused by intentional or grossly negligent conduct on the part of Releasees. I further agree to indemnify and hold harmless Releasees for any loss, liability, claim, or injury caused by me (my child) while participating in this activity, including traveling to, from, and for the activity, or while on premises owned or controlled by Releasees.

I also give my permission for me and/or my child to receive any emergency medical treatment by a healthcare professional, including emergency medical transportation, which may be required for injuries sustained by me and/or my child. I agree to indemnify and hold harmless Releasees for any costs incurred to treat me and/or my child, even if a Releasee has signed hospital documentation promising to pay for the treatment.

Participant's Name: _____

Participant's Signature _____ **Date:** _____
(18 or older)

Parent/Legal Guardian Signature _____ **Date:** _____
(for those members younger than 18)

I agree to follow all instructions and procedures in order to maintain a maximum level of safety.

Participant's Signature: _____ ***Date*** _____

If the participant has medical insurance, please indicate the:

Insurance Company: _____

Policy Number: _____

Name of Primary Policy Holder: _____

State law requires you be informed of the following:
(1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.

Texas 4-H and Youth Development
2017-2018 Code of Conduct

TEXAS A&M AGRILIFE EXTENSION

During my 4-H involvement...

1. I am expected to attend all sessions that are part of the planned program for all activities. I will inform staff if I am not feeling well or have another conflict.

2. I will dress appropriately to the occasion and adhere to any attire requirements stipulated for the event I am attending. 4-H members should be courteous and clean, and possess good manners.

3. Language must be controlled and appropriate for a 4-H member — I will not use language that is socially offensive.

4. Except for planned tours and outings, I will not leave an activity facility any time without permission of the chaperone and/or staff responsible for the event.

5. I will not smoke or use tobacco products, or be in possession of such products, at any 4-H program event.

6. I will not be in possession of, use alcohol or drugs (except those directed by a doctor), or be associated with or remain in the presence of others when they are being used.

7. I will not be in possession of, use, or threaten another person with a weapon, bodily force or language.

8. I will respect the rights of privacy of those attending an activity and those with whom I may be rooming.

9. (**Not applicable for this camp**) I will observe hours established by the staff and be in my room. No boys in girls' rooms, no girls in boys' rooms.

10. I will avoid unnecessary roughness to room furnishings, furniture, equipment, etc. Towels, ashtrays, etc., are not to be taken as souvenirs. Occupants of a room or conveyance are financially responsible for any damage or results of misconduct.

11. Any participant at an official 4-H activity who observes a breach of the code of conduct has the responsibility and obligation to report the misbehavior to appropriate chaperones.

_____ _____

Date Member Signature

_____ _____

Date Parent/Guardian Signature

Educational programs of the Texas A&M AgriLife Extension Service are open to all people without regard to race, color, religion, sex, national origin, age, disability, genetic information or veteran status.
The Texas A&M University System, U.S. Department of Agriculture, and the County Commissioners Courts of Texas Cooperating

Texas 4-H Youth Development
2017-2018 Media/Photograph Release

TEXAS A&M AGRILIFE EXTENSION

I understand the photograph(s) or video or audio recording(s) taken of me by agents, employees or representatives of the Texas A&M AgriLife Extension Service and its Texas 4-H Youth Development Program (hereinafter called "the Agency") shall be used in connection with the Agency's dissemination of information by its public service and academic programs to the general public.

I hereby irrevocably authorize the Agency to copy, exhibit, publish or distribute any and all such images and audio of me or wherein I appear, including composite or artistic forms and media, for purposes of publicizing Agency programs or for any other lawful purpose. In addition, I waive any right to inspect or approve the finished product, including written copy, wherein my likeness appears.

I hereby hold harmless and release and forever discharge the Agency from all claims, demands and causes of action which I, my heirs, representatives, executors, administrators or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

_____ _____
Date Member Signature

_____
Printed Name

_____
Street Address

_____
City/State/Zip Code

(If the person signing is under age 21, there should be consent by a parent or guardian, as follows:)

I hereby certify that I am the parent or guardian of _____, the minor named above, and do hereby give my consent without reservations to the foregoing on behalf of this person.

_____ _____
Date Parent/Guardian Printed Name

_____
Parent/Guardian Signature

Multi-County 4-H N.O.V.A Camp

General Schedule of Events

Exact Times to be announced, but at this time, plan to arrive at the location at 8:30am each morning and finishing about 4:00pm each day.

Monday

Upshur Co.: Dairy Farming 101 & Outback Wildlife Feeders, Gilmer

Tuesday

Community Service activities in Upshur Co.
Windridge Therapeutic Equestrian Center of East TX &
Gilmer Lake Walking Trail Clean Up, (water play TBD)

Wednesday

Camp Co.Orchards – Los Pinos Ranch & Vineyards and Efurd Orchards Tours

Thursday

Smith Co.: Bees, Birds, Bugs & Woodland ID Trail Walks @ Tyler State Park
(swimming TBD)

Friday

Wood Co.: Mineola Nature Preserve - Plant ID & Fishing