February 9, 2015

Dear 4-H Camper,

Are you ready to attend Junior 4-H Camp this year?! Cannon County has been assigned the week of June 15-19, 2015. Camp will be held at the Clyde M. York Center in Crossville, TN and is for 4-H members completing the 4th, 5th, or 6th grades. We will depart on Monday and return on Friday. That week you will enjoy all of our traditional camping activities like swimming, fishing, canoeing, kayaking, crafts, gau-gau, archery, rifle, and more. There are sports like basketball, soccer, softball, and games galore. Don’t forget summer fun on Thursday night where you have a choice of movie, swimming or the dance.

If you are making plans to attend complete the registration form on the back of this page and bring it along with the $300.00 camp fee (If you wish to participate in the camp payment plan, you can pay part of the fee at registration before March 23rd and the remaining on or before May 25, 2015.) To ensure you have a place at camp all fees must be paid in full by May 25th. Make checks or money orders payable to: University of Tennessee. If you would prefer to pay with a credit card, the camp fee will be $315.00. You will receive a complete packet of camp information at registration including a packing list, medical authorization form, and departure and return times. The cost of Junior 4-H Camp includes transportation and T-shirt.

Registration will be accepted on a first come, first served basis until our quota of campers is filled. There will be NO REFUNDS after May 29, 2015.

If you have further questions, call the 4-H office at 563-2554 or visit our website cannon.tennessee.edu

We look forward to a fun week at 4-H Camp and hope you can join us!

Sincerely,

Sarah Malone
UT Extension Agent II
Junior 4-H Camp
Registration Form

PLEASE PRINT

Child’s Name ____________________________________________

Age: _______ Grade As of 1/1/15: _________ Sex F or M Race: __________________________

Street Address________________________________________ City: ______________ Zip ______

Phone Number(s): __________________________ Email Address: _______________________

Name of Parent/Guardian: ____________________________________________

School: ____________________________ Teacher: ________________________________

Circle T-shirt size (all sizes are adult) S M L XL XXL

To pay by credit card: https://secure.touchnet.com/C21610_ustores/web/product_detail.jsp?PRODUCTID=251

***Please list any allergies or special needs (physical, dietary restrictions, etc.)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

***Please notify agent of any allergies or special needs so we can make arrangements to accommodate your child***

Required Signature: ________________________________________________________

Parent/Guardian

FOR OFFICE USE ONLY

Circle: Check, Cash, or Credit Card

Check #_______ Amount__________

Circle: PAID IN FULL on date __________

OR … PAID 1ST HALF on date__________

PAID 2ND HALF on date __________