

2024

# Shelby County 4-H Camp

July 1-5

Lake Cumberland  
4-H Camp

Cost: \$200 (\$50 Deposit)



Open to Shelby County Youth Ages 9-13

WHAT: Shelby County 4-H Camp

WHEN: July 1-5, 2024

WHERE: Lake Cumberland 4-H Center - Jabez, Kentucky

AGE: Anyone who is 9 to 13 years old prior to the camping date is eligible to attend 4-H Camp if they live or attend school in Shelby County. 14 year olds are eligible to attend as a camper if they are currently enrolled in 8th grade. You do not have to belong to Shelby County 4-H to attend camp.

COST: **\$200**— This includes transportation, insurance, lodging, meals, and all activities. A deposit of \$50 will hold a camper's spot upon registration. Cost may be paid in full or in installments. Cash or check ONLY. Final payment is due **June 7, 2024**. Please contact our office if you have questions concerning payments. This fee includes a sponsorship from the Shelby Co. Extension District Board.

**\*\* If your child has behavior issues at school, they usually will not have a successful camp experience due to the unstructured camp environment. Parents are responsible for picking up their child from camp if their behavior is disruptive and no refunds will be given.\*\***

#### HOW DO I REGISTER?

*Complete both sides of the registration form and return it to the Extension Office. Camp fee or \$50 deposit is due with the registration form. You will receive additional forms, class request form and information in the mail that must be completed prior to attending camp.*

#### RETURN ALL FORMS TO :

Shelby County Extension Office  
1117 Frankfort Rd  
Shelbyville, KY 40065



(Checks should be made out to **SHELBY COUNTY 4-H COUNCIL**)

QUESTIONS: Call the Shelby County Extension Office at 633-4593 or e-mail [candice.fulcher@uky.edu](mailto:candice.fulcher@uky.edu) or [rbrownin@uky.edu](mailto:rbrownin@uky.edu)





## Shelby County 4-H Camp Registration Form

*\*Additional forms will be required\**

*This page to be completed by a parent or guardian, please.*

Camper's Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone Number: (Contact #1) \_\_\_\_\_ (Contact #2) \_\_\_\_\_

Parent E-Mail \_\_\_\_\_

☐

Check the box if you would prefer to receive all camp paperwork to the e-mail provided above  
(If this box is checked you will not receive any camp information in the mail)

Has camper attended 4-H Camp before? (circle one) Yes No If yes, how many years? \_\_\_\_\_

Camper's Age at Time of Camp \_\_\_\_\_

Gender: (circle one) Male Female

Race: (circle all that apply) American Indian Asian Black Pacific Islander White (Necessary to comply with Federal Civil Right's Standards)

Ethnicity: (circle one) Hispanic Non-Hispanic (Necessary to comply with Federal Civil Right's Standards)

School Attended in (2023-2024) \_\_\_\_\_

Grade in School (2023-2024) \_\_\_\_\_



T-Shirt Size, Please Circle ONE:

Youth Medium      Youth Large      Adult Small      Adult Medium      Adult Large  
Adult X-Large      Adult 2X-Large

**For office use only**

Cash Paid \$ \_\_\_\_\_

Check # \_\_\_\_\_ Amount \$ \_\_\_\_\_

Date Submitted:      /      /2024

Initials Received By: \_\_\_\_\_

**Does your camper have dietary restrictions? ( circle one) Yes No**

If Yes, please explain \_\_\_\_\_

**Does your camper have an allergy we need to be aware of? ( circle one) Yes No**

If Yes, please explain \_\_\_\_\_

**Does your camper have medical conditions or disabilities we need to be aware of? ( circle one) Yes No**

If Yes, please explain \_\_\_\_\_

**Does your camper have behavioral issues ? ( circle one) Yes No**

If Yes, please explain \_\_\_\_\_

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**Name of ONE camper that you would like to room with if possible (Cabins are typically grouped by similar age and by school attended)**

**In the event a refund check needs to be issued, checks will be mailed out to the mailing address listed on this form. Please make my 4-H Camp Refund Check Payable to:**

**Parent's Name(s) PRINTED:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_



## Cooperative Extension Service

Agriculture and Natural Resources  
Family and Consumer Sciences  
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Disabilities  
accommodated  
with prior notification.