4-H Camp Registration Form Choose the camp or camps you are registering for. (Make note of the registration deadlines, camps do not have same deadlines.)

(Make Hote of the re	gistiatio	n ucau	unes, camps do n	othav	s sairie de	autilies.)		
Full Name:								
Date of Birth:	Age:		School:			Grade:		
Address:								
City: State		State	ı		Zip Code:			
Parent/Guardian:								
Phone:	Ge	ender (d	circle one):	Male	!	Female		
Email Address:								
The following information will be used solely for compliance with affirmative action programs. (Check what Applies)								
Ethnicity: Hispanic Non-Hispanic								
Race: White Black Asian Alaskan/American Indian Pacific Islander								
T-Shirt Size (Adult Size Only): Small Medium Large XL XXL XXXL								
List any food allergies/Dietary Needs:								
Medical Condition: Yes or No (If yes please give a brief discription.)								
*(Quilt Camp Only) State any experience you have with sewing on a sewing machine.								
*/Quilt Comp Only) It is impo	rtant in o	nuilting	to he able to mal	/0.00ns	sistant 1/, s	oamel Sow a 1/		
*(Quilt Camp Only) It is important in quilting to be able to make consistent ¼ seams! Sew a ¼ seam around the edge of this application as a sample of your sewing skills.								
*(Quilt Camp, Fashion Design Conf., and Electric Camp Only) Roomate Preference:								
*(Fashion Design Conf. Only) Fashion Show (select one): Sewn Purchased Both								
Check the camps you are registering for: Target Smart Camp Fashion & Design Conf. Quilt Electric Jr. High								
If you participated in a fundraiser for camp this year, check all that apply:								
Paper Clover- Spring 23 Fall 23 Hanging Basket Fundraiser								

lu Llidh O Flad	trie Comp Cal	h a l a ra k	in Application					
Jr. High & Electric Camp Scholarship Application								
To Apply: Complete both the registration form and scholarship application.								
Deadline to Apply: May 24 th								
	camp scholarship are		_					
		Electric Ca	mp					
Applicant Information								
Name:								
Age:	Grade:		School:					
Family Information								
Name of Parent/Guardian:								
Traine of Farence Cauraian.								
Name of Parent/Guardian:								
Address (If different that applicants):								
, in the second								
City:	City: State:							
Number of Brothers & Their Ages:								
Number of Sisters & Their Ages:								
Will you have any brothers or sisters attending 4-H Camp this summer? Yes No								
If yes, which camp or camps?								
Father/Guardian's Occupation:		I	Age:					
Employer:								
Mother/Guardian's Occupation:			Age:					
Tioner, Guardian a Geoupation.			Ago.					
Employer:		Phone:						
List what you have done in 4-H this year:								
Scholarship Information								
Partial Scholarship will be awarded based on need.								
How much could you afford to pay toward a camping fee?								
Circle all fundraisers that you participated in since Spring 2023:								
Paper Clover – Spring 23 Fall 23 Hanging Baskets 24								