

Horse Camp Counselor Application 2019

June 10-14 2019

Youth 7th Grade and older may apply

ALL APPLICANTS MUST BE ENROLLED IN THE 4H HORSE PROJECT

As a counselor it is critical that you commit to be present for the entire camp

Name: _____ PREMISE ID#: _____
First Last

Age (As of 1/1/19): _____ Grade Level for 2018/2019: _____ Male Female (Circle One)

Address: _____
Street Address

City State ZIP Code

Phone: _____ Email _____ Cell # _____

Years in Horse Youth Leadership Project _____

Shirt Size (Adult) _____ S _____ M _____ L _____ XL

Why do you want to be a Horse Camp Counselor/group leader?

Any Additional Horse Project Leadership Roles/Volunteer Positions (Food Booth, Clinics, etc.) that you have helped with?

Leadership Training (Describe/list any leadership training in which you have participated. Either 4H or other.)

* By my signature, I attest that the information contained in this application is true to the best of my knowledge.

* Applications will be accepted for both Junior and Senior Counselors. Positions will be determined based on Age, Experience, Need and Space by the Horse Camp Planning Team.

* Camp Counselor Training Retreat / ABC Clinic is Tentatively Scheduled for April

*** Accepted Counselors will be expected to attend the Retreat Weekend.**

I understand that this is an **application only** and that I will be contacted upon acceptance as a 2018 Camp Counselor.

Member Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Mail by: February 25, 2019 to:
Teresa Halstrom – Polk County Horse Project
2355 113th Avenue
Dresser WI 54009

4H Club: _____

Name of Horse that will be used for Camp: _____

How long have you been riding this horse? _____

All horses attending camp must have a current Negative Coggins. Coggins must be submitted prior to camp and the original will be verified upon check in.

Parent(s) Guardian _____

Relationship: _____

Address: _____

Phone: _____ Email: _____ Cell: _____

In Case of Emergency: _____ Relationship: _____

Phone: _____

Parents & Guardians are welcome to visit during camp. But all adults intending to stay on fair park grounds overnight MUST attend the 4H Adult Volunteer Training and have a background check. For more information please contact the Extension Office

Per 4H Policy, boys and girls that are not in the same family are NOT allowed to stay in the same accommodation without direct onsite parent/guardian supervision

Where will the 4H Camper be staying? (Choose One)

Tent City _____ Travel Trailer _____ Undecided _____

If camper choice is a travel trailer, do you require electrical access? (\$15 additional/\$5 per night x 3 nights)

Yes _____ No _____

Whom will 4H Camper be staying with? _____

(Please see note above concerning adults on Fair Park Grounds after hours)

Counselor Registration Fee \$75.00 = _____

Electric (for Travel Trailers and Campers only, \$5 per night x 4 nights = \$20): _____

Only one Electric Fee Per Trailer Camper +\$20.00 = _____

Each Parent/Non-Camper Staying on-site (\$15.00 includes all meals)

– Volunteer Card Required for Overnight Stay # Adults _____ x \$15.00 = _____

Total Amount Due _____

Make Checks Payable to Polk County 4H Federation

(Checks will not be cashed prior to March 15th.)

OFFICE USE ONLY:

4H Medical Release: _____ Payment: Check # _____ Amt: \$ _____