

DAY 1 CAMP - TUESDAY

JUNE 4

Youth entering 3rd-5th grade 9:00 AM - 4:00 PM

FEE: SHO

DAY 2 CAMP - THURSDAY

JUNE 6

Youth ages 5-7 9:00 AM - 3:00 PM

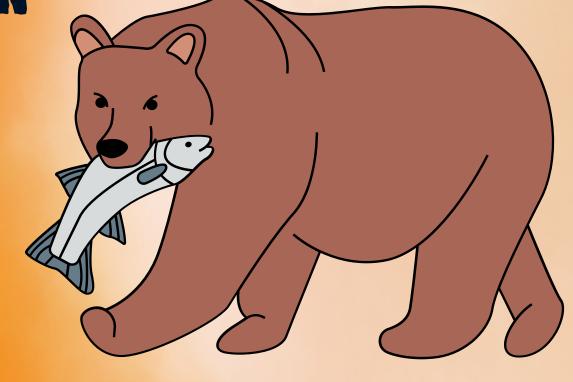
FEE: SHO

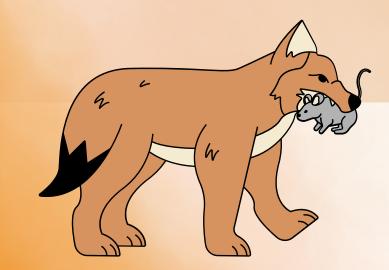
CEDAR POINT BIOLOGICAL STATION

170 CEDAR PT DR., OGALLALA, NE 69153

Camp fees include facilities, lunch, snacks, activities & projects, t-shirt & insurance

REGISTRATIONS DUE MAY 3RD RETURN TO THE KEITH-ARTHUR EXTENSION OFFICE





For more information contact:

Keith/Arthur Counties: Tessa Reece, 4-H Educator Garden/Morrill Counties: Sarah Paisley, 4-H Educator Perkins County: Debbie Kuenning, 4-H Educator

284-6051 772-3311 or 262-1022 352-4340

tessa.reece@unl.edu spaisley3@unl.edu dkuenning2@unl.edu

The University of Nebraska–Lincoln has a strong interest in protecting the safety of youth in all University-sponsored programs and events, including those offered by Nebraska Extension 4-H Youth Development. Therefore, in 2012, the University of Nebraska-Lincoln implemented a Youth Activity Safety Policy in order to provide a safe, educational and enjoyable activity/program experience for all participants. This policy provides minimum specific guidelines for activities sponsored by the University of Nebraska-Lincoln. The University reserves the right to discontinue an activity if it is found to be in violation of these policies.





WILDERNESS WONDERS 4-H CAMP

MIE HI

Keith/Arthur Counties: Tessa Reece, 4-H Educator

Garden/Morrill Counties: Sarah Paisley, 4-H Educator

REGISTRATION FORM



tessa.reece@unl.edu

spaisley3@unl.edu

Please return registration form with \$40 fee (payable to UNL Extension) AND Nebraska 4-H Participant Permission and Health form (if you are not already an enrolled 4-H member). The Health Form can be found here: https://go.unl.edu/gqv4 or contact the Extension Office for the form. Registration forms & Health forms are due by May 3rd to: Keith-Arthur Extension Office, 511 North Spruce, Room 203, Ogallala, NE 69153.

284-6051

772-3311 or 262-1022

Perkins County: Debbie Kuenning, 4-H Educator				352-4340 dkuenning2@unl.edu			
Please Circle:	MALE	/	FEMALE	Camp Attending (please circ	<mark>le):</mark> Jo	une 4	June 6
Name:							
Age as of Jan. 01, 2	2024:	_		Grade Level for Fall 2024:			
Phone Number:				Emergency Phone Contact:			
T-shirt Size:							
Allergies:							
Medications:							
				ilities, lunch, snacks, activitien ndling charge for all refunds.	_	ects t-	shirt &
Nebraska Extension, C	edar Point · loss to car	Biolog mpers.	ical Statio The camp	AND SIGN THE FOLLOWING: on or any other associate involver er agrees to indemnify the can him.			•
_		_		/photograph in publications, a lia pertaining to 4-H.	ads, new	s articl	es,
Camper							
Signature:	ture:				Date	•	



