

# 4-H CAMP COUNSELOR APPLICATION

Summer Camp (Ages 14-19 years old by January 1, 2019)  
Cloverbud Camp (Ages 12-19 years old by January 1, 2019)

NAME: \_\_\_\_\_ COUNTY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

AGE: \_\_\_\_\_ GENDER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PARENT'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

NUMBER OF YEARS IN 4-H: \_\_\_\_\_ CLUB NAME: \_\_\_\_\_

T-shirt Size (check one) Adult: S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ 2X \_\_\_\_\_ 3X \_\_\_\_\_

Please check all the areas listed below as to your capability (Teaching or Helping with).

**Use T for teach and H for help.**

____ Sports, be specific: _____	____ Waterfront	____ Singing
____ Crafts, be specific: _____	____ Games	____ Nature
____ Other, explain: _____		

Are you certified for any of the following (not required)? ☐ CPR ☐ First Aid ☐ Water Front Safety

Please write a paragraph describing your leadership experiences in 4-H and other activities such as school, church, etc.

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**Part of the selection process will require an interview with an MSU Extension staff member. We will contact you when the date is set.**

Check the camps below that you want to work at:

\_\_\_\_ July 9, 10, & 11 **4-H Summer Camp** - overnight camp for 8-13 year olds  
(July 8 - Camp counselor training and camp prep)

\_\_\_\_ July 16 & 17 **Cloverbud Day Camp** - day camp for 5-7 year olds

**Due in the MSU Extension office by June 1, 2019!**

**MICHIGAN STATE**  
UNIVERSITY | **Extension**



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# 4-H Overnight Housing Parent/Guardian Permission Form

**Parent/Guardian: Please complete the following information and return the top portion of this sheet to name/address of 4-H staff member by date. Keep the information at the bottom of this form for your records.**

I understand that my child \_\_\_\_\_ will be attending  
(name of child)

\_\_\_\_\_ on \_\_\_\_\_  
(name of event) (date of event)

at \_\_\_\_\_ and that he or she may be sharing lodging  
(location of event)

with an unrelated adult (21 or older) who has been through the Michigan State University Extension Child Well-Being Volunteer Selection Process\* and with at least one other youth. By signing this form I give my permission for my child to attend this event under these lodging conditions. I also understand the Michigan 4-H Code of Conduct\*\* expectations for adults and youth attending this event.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date



**Parent/Guardian: Keep this information for your records:**

Name of event: 4-H Summer Camp

Date of event: July 9, 10, & 11

Location of event: Coldwater Lake 4-H Camp

In case of an emergency requiring you to contact your child during the event, contact:

Kristi Schreiber (Isabella County 4-H Coordinator) at 989-330-5131  
Jake Stieg (Osceola County 4-H Coordinator) at 231-832-9485  
Chris Thompson (Gratiot County 4-H Coordinator) at 989-506-2593

\*For more information on the **Michigan State University Extension Volunteer Selection Process**, contact your local 4-H staff member or go to <http://web1.msue.msu.edu/msue/cyf/youth/cwbvbsp.html>

**\*\*Michigan 4-H Code of Conduct for 4-H Activities:** Positive behavior is a key expectation for youth and adults participating in 4-H activities – behavior that reflects trustworthiness, respect, responsibility, fairness, caring and citizenship. Participants are expected to follow all workshop and event guidelines. Theft, vandalism, the use of illegal drugs and alcohol, inappropriate or threatening behavior that violates the rights of others, and other such offenses are strictly prohibited, and anyone involved with these offenses will immediately be sent home at his or her own expense. If it is determined by 4-H staff or persons in charge of the activity that the offense warrants it, the offender will be turned over to the proper authorities.