

May 3-5, 2019

Lake and Trails-Youth Fishing Camp

FFA Camp Muskingum



- ❖ General Information- please print and fill out completely
- ❖ One form per participant – Youth and Adult on Separate forms
- ❖ Camp for Youth Ages: 9yr old and up
- ❖ Registration closes April 1, 2019 or when camp is full (180 youth)
- ❖ Program dates: Friday May 3 at 1:30pm thru Sunday May 5th at 11am
- ❖ Check in begins at 12 noon on Friday May 3

Name _____ Male _____ Female _____

Age _____

Birth date ____/____/____

Address _____ Phone _____

City _____ State _____ Zip _____

Email address _____

Attending as a: Youth _____ Adult _____ Instructor _____

*Please fill in an email if you have one so we may email confirmation.

Youth Section

1st Year- copy of birth certificate or state ID enclosed with registration

2nd Year

3rd Year

4th Year

5th Year interested in building a fishing rod

Interested in being a Junior Instructor

Adult Name attending with: _____

Sponsoring Club: _____

Other Youth attending with: _____

Adult Section

- ❖ I am an adult and am bringing these youth to camp:

- ❖ An adult may bring up to 3 youth

1. _____

2. _____

3. _____

Registration Fees

I am enclosing \$85 for youth under 18yr old for program registration

I am enclosing \$95 for adult for program registration

My Club is the Sponsoring Organization and is paying for my participation

Club name and contact person: _____

My Club is paying a portion of registration and I am responsible for _____

All 1st year youth will receive a rod/reel combo at registration.

2nd, 3rd, & 4th year youth are responsible to bring their own rod/reel combo for fishing.

Youth may bring their own tackle, but it is not required.

Lake and Trails is not responsible for lost or stolen items.

Medical Information

Mother's Name or Legal Guardian SEP

home phone _____ cell phone _____

Father's Name or Legal Guardian SEP

home phone _____ cell phone _____

Family Doctor _____ phone _____

In case of emergency, notify: _____

Insurance Information: _____ (carrier)
Policy # _____ Name of Insured _____

Participant Release- Must be filled out and signed by Parent

I give my permission for (youth name) _____ to attend Lake and Trails Youth Fishing Camp and to be subject to the rules and guidelines set for by the FFA Camp Muskingum and Lake and Trails Organization. I give my permission for the above youth to participate in any planned activities under the supervision of Volunteers, Certified Instructors, ODNR Officers, and Lake and Trails Organization Committee Members. I also understand that the Committee may dismiss my child from the camp if, in their opinion, his/her conduct or influence is not in the best interest of the entire group. I will not hold FFA Camp Muskingum or Lake and Trails Organization responsible or liable for accidents, which may occur to the camper while on camp premises, or for the loss of personal articles brought to the camp. I also give my permission for the use of any photo of the above named to be used for program public relations, without compensation or consideration in any form.

I understand that my child's participation in programs offered by Lake and Trails Organization include both classroom and hands on teaching techniques, which include but are not limited to: Fishing, knot tying, lure making, bow fishing, pontoon boat fishing, bow fishing, casting techniques, canoeing, kayaking, row boats and motor boats. I realize that my child's participation is purely voluntary.

Please describe any activities that you Do Not give your child permission to participate in: _____

I hereby give permission for emergency treatment of my child in case of accident or illness, and for normal treatment during the program. I realize that Lake and Trails Organization will make every effort to contact, first the adult present and then the legal guardians, followed by the person to notify in case of emergency. I understand that the accompanying adult present with your child will be responsible for his/her conduct and will accompany them to the hospital if necessary. I give permission to

_____ (accompanying adult) to authorize medical personnel to order routine tests, x-rays, treatment; to release any insurance and medical information, and arrange necessary transportation. I also give permission to the physician selected by the assigned member to secure and administer treatment, including hospitalization for the above named person.

If my child is injured while at camp or traveling to and from Lake and Trails Organization Youth Fishing Camp, my family and myself waive any legal claim against Lake and Trails Organization, its Committee Members, certified instructors or volunteers,

I understand that by signing below, I have read and understand the above statements:

Signature _____

Relationship _____

Date _____

Lake and Trails Organization Code of Conduct / Camp Rules

Please read the following **Code of Conduct/ Camp Rules**. If you agree with and are willing to comply with all of the expectations of the **Code of Conduct/ Camp Rules** and Lake and Trails Organization Youth Fishing Camp, please sign below.

Accompanying Adult: Please read the following **Code of Conduct/ Camp Rules** and sign the bottom of this form to show your intent to support the implementation of this **Code of Conduct/ Camp Rules** in regards to your youth at camp.

- I will participate in all aspects of the camp program and to follow the daily camp schedule. [L]
[SEP]
- Smoking is prohibited in all buildings and by anyone less than 18 years of age. [L]
[SEP]
- Alcohol is prohibited in the camp during camp programs. [L]
[SEP]
- Possession of recreational/ illegal drugs and dispensing of prescription drugs without proper [L]
[SEP] authorization will result in immediate expulsion. [L]
[SEP]
- If a youth is expelled from the program, the accompanying adult and other youth under that adult must also leave the program, or arrangements must be made for a parent to come and pick up the youth expelled immediately. [L]
[SEP]
- I am personally responsible for the equipment I use from the camp, and will pay for damaged or lost equipment. [L]
[SEP]
- I will conduct myself with respect towards other campers, instructors, staff, so that I may also be respected. [L]
[SEP]
- Swimming is prohibited during camp program. [L]
[SEP]
- Personal firearms or ammunition are not allowed in the camp without authorization from Lake and Trails Committee. [L]
[SEP]
- **All vehicles must be parked in designated areas. Only authorized Instructors, Committee Members and Camp personnel may use golf carts and ATV vehicles if registered ahead of time.** If seeking special permission please contact Joe Lukcs at Joe@lakeandtrails.org.
- No unauthorized pets may be brought to camp. [L]
[SEP]
- Electronic games, CD players, Radios... are not permitted in the Dorms and should not be brought to camp. Lake and Trails Organization is not responsible for lost or stolen items. [L]
[SEP]
- All youth must stay in dormitories and have an accompanying adult responsible for them. [L]
[SEP]
- All youth less than 18 yrs old must be in their dormitories by 10:30 pm. Lights out for youth is at 11:00pm. [L]
[SEP]
- Only registered guests of the program, invited guests or instructors are permitted in camp during the program. If you are a parent who would like to come down and see your child during the program, you must check in with camp staff or Committee Members upon arrival at the camp. [L]
[SEP]
- Youth must wear their Badges at all times on the outside of their clothing, clearly visible at all times.
- No food in the Dormitories for any reason.
- Youth and Parents will stay for the entire Program, unless previously discussed with Committee. [L]
[SEP]
- Refunds will be made 4 weeks prior to camp, no refunds will be given at camp or for expelled individuals. [L]
[SEP]

I, _____ have read and understand the Code of Conduct/ Camp Rules. I agree to abide by it. [L]
[SEP]

Signature of youth

Date

Signature of Parent/ Guardian

Date

Lake and Trails Organization

Instructor Form

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Cell _____

Email _____

Clinic instructing: _____

Check One:

I will be attending entire program and staying in camp facilities

I will be attending a portion of program and will not be staying in camp facilities

For those staying in Camp Facilities, instructor fee of \$40 must be sent in with this form.

Junior Instructors- Youth Section

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Cell _____

Email _____

Preference on Clinic _____

- Lake and Trails Committee will assign all Junior Instructors to their specific clinic assignments.
- All Junior Instructors will assist with evening Clinics and abide by the Code of Camp Rules.
- All Junior Instructors will sign Code of Conduct/ Camp Rules, including Parent/ Guardian signature. Also include Medical information and Participant Release.

Fee for Junior Instructors is \$85 if under 18 yrs old and \$95 over 18 yrs old

Mail Registration forms and Money to:

Lake and Trails Organization
c/o Ellen Bertel
319 W Highland Rd.
Northfield, Oh 44067

Registration: Email Ellen Bertel at ebertel@aol.com
Questions/Concerns: Joe Lukcs at joe@lakeandtrails.org