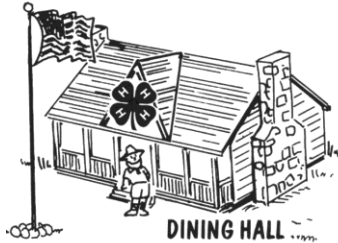


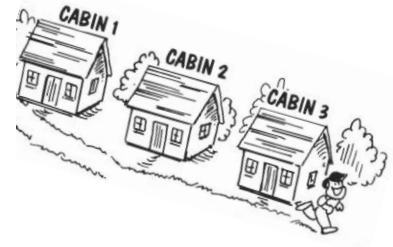
4-H Family Camp

Somerset County 4-H Family Camp Weekend



Lindley G. Cook 4-H Camp

100 Struble Road
Branchville, NJ 07826



June 3 – June 5, 2022

(Register by May 13th)

The Family Camp Experience

Family Camp offers the experience of group living, learning to get along with others, exploring new interests, and making new friends. It also introduces the children to our NJ 4-H Camp where week-long summer camps are offered. Camping is one of the most valuable experiences a family can have together. Families who go to camp learn to appreciate the wonder and majesty of the outdoors.

Lindley G. Cook 4-H Camp

The L.G. Cook NJ 4-H Camp is licensed by the NJ Department of Health. The camp is situated in the woods of Stokes State Forest, beside Lake Shawanni which is located in the northwestern part of Sussex County, NJ.

Lodging is in rustic cabins sleeping 18 people in bunk beds. Families from the same club bunk together in the same cabin. Remember, you will not need all the comforts of home - the camp is a place to enjoy nature and the outdoors, and the cabins are only a place for rest after a busy day.

Camp has separate facilities equipped with hot and cold running water, flush toilets, and dormitory showers with privacy curtains. There is a dining hall with a fully equipped kitchen where all meals are prepared, covered recreation area, craft barn, nature center, boat dock with canoes, and a beautiful lake with an area for fishing. Group recreation is held in the large field next to the dining hall.

No smoking is allowed in the cabins and **no pets** or alcoholic beverages are allowed anywhere on the grounds. Although we love pets, this is a camp rule.

Program and Activities

Arrival time is Friday between 5:00pm and 8:00pm. Welcoming activities and snacks begin Friday evening at the dining hall. A full day with a variety of activities takes place on Saturday.

Our goal for Saturday is for you and your family to choose the activities that interest you. Therefore, our schedule for Saturday includes time for: boating, hiking, games, arts and crafts, fishing, and nature appreciation. We enjoy spontaneity and encourage you to involve other families in a board game, ball game, or other activity that interests you and your family. Saturday evening there is a special all-camp game and torch parade to close the day.

After breakfast on Sunday, cleaning up camp, and packing up gear, there is still time to do a little fishing before heading back home. Departure is by 12:00 noon.

Staff and Parent Volunteers

There is only 4-H staff from Somerset County on hand at camp during this weekend. Certified lifeguards will instruct and supervise the boating area during specific boating times. Parent volunteers manage the craft barn and fishing area.

4-H Adult volunteers prepare the main meals and snacks. An adult member from family is encouraged to help in the kitchen (prep or cleanup) for one or more meals. Sign-up sheets for the various jobs will be posted in the dining hall on Friday.

The entire camp is under the direction of the County 4-H Program Coordinator, Jill Brochinsky.

Registration Process

The camp fee, which covers the cost of lodging, meals, and activities, is \$60.00 per person. There is no fee for children under age 3. You must submit the following forms: (1) Family Camp Registration; (2) New Jersey 4-H Event Permission Form for Youth (one per child); (3) New Jersey 4-H Release/Agreement Form for Adults (one per adult). Submit all forms with the appropriate fees by **May 13, 2022**. Last minute cancellations are subject to a \$25 fee. Checks should be made payable to: **Somerset County 4-H Prep**.

Financial assistance is available for those who most need it. Do not hesitate to contact Jill Brochinsky (908-526-6644) for more information. Your requests will be held in confidence.



What to bring...

Sleeping bag or blankets and sheets
Pillow and pillowcase
Toiletry articles such as soap, shampoo, toothbrush, toothpaste, comb, brush
Towels, washcloth
Comfortable clothing including shorts, jeans, shirts, sweats/pajamas, underwear
Sweater or jacket
Sneakers and socks (closed-toe shoes are required for some activities)
Sturdy shoes if planning on hiking
Raingear

You may also want...

Flashlight
Bathing Suit
Fishing pole
Board/Card Games and Puzzles
Camera
Binoculars
Insect repellent
Sunscreen



Directions to Camp

Take Route 206 North all the way to Sussex County. Continue on Route 206 N. out of Newton to Ross Corner at Augusta*. At this point, turn left and stay on Rt. 206 N. past Branchville and Culver Lake. Watch for the Stokes State Forest office sign on the right. Continue on Rt. 206 for a short distance. After you pass the Jumboland Diner, you will see a yellow sign for Coursen Road. Once you pass Coursen Road the next left turn will be Struble Road. Turn left (about halfway down the hill) onto Struble Road; you will go past a Boy Scout Camp, vacation homes, and a lake on your left. At the fork in the road, you will see the sign for L.G. Cook 4-H Camp. Bear right at the fork and slowly follow the road into camp. The 4-H camp is about 4 miles down Struble Road from Route 206.

Or

Take 287 North to Route 80 West. Exit onto Route 15 North to 206 North at Ross Corner in Augusta. Continue to follow above directions out of Augusta*.

If you need to reach Jill Brochinsky at camp she can be reached at (908) 251-3045.

Rutgers Cooperative Extension (RCE) is an equal opportunity program provider and employer. Contact your local Extension Office for information regarding special needs or accommodations. Contact the State Extension Director's Office if you have concerns related to discrimination, 848-932-3583.

RUTGERS

New Jersey Agricultural
Experiment Station

Cooperating Agencies: Rutgers, The State University of New Jersey, U.S. Department of Agriculture, and County Boards of Chosen Freeholders. Rutgers Cooperative Extension, a unit of the Rutgers New Jersey Agricultural Experiment Station, is an equal opportunity program provider and employer.

**Somerset County 4-H
Family Camp Registration**

Please complete this form with the names of all family members attending.

4-H Members _____ Age ____ Pronoun _____ Grade _____
_____ Age ____ Pronoun _____ Grade _____
_____ Age ____ Pronoun _____ Grade _____

Additional Family Children _____ Age ____ Pronoun _____ Grade _____
_____ Age ____ Pronoun _____ Grade _____

Adults _____ Pronoun _____
_____ Pronoun _____

Address _____

_____ **Phone** _____

Email _____

Total No. Attending _____ **X \$60.00** **Total Fee Submitted \$** _____
(Make checks out to: Somerset County 4-H Prep)
or pay online

4-H Club(s) _____

To facilitate cabin assignments, please check off the following:

_____ **Female only cabin** _____ **Male only cabin** _____ **Multi-Family cabin**
Will accommodate male or female only cabin if possible.

If possible, assign me/us in a cabin with:

_____ **name(s) or club**

List any dietary restrictions: _____

All forms and payment are due by: Friday May 13, 2022.
Send to: Somerset County 4-H, 310 Milltown Rd, Bridgewater, NJ 08807
Or email completed forms to: jbrochinsky@co.somerset.nj.us

New Jersey 4-H Event Permission Form for Youth



Both sides of this form must be completed by all youth participating in overnight activities, field trips, events requiring group transportation, and any other events sponsored through the 4-H Youth Development Program where it is deemed necessary by the event coordinator(s) (paid 4-H staff and/or registered 4-H volunteer) responsible for the youth participants. The form should be submitted prior to the event. The form has five parts: (1) information about the participant and activity, (2) parental permission and liability release, (3) medical emergency authorization and health information, and (4) code of conduct and (5) media policy. *Be sure to complete all five parts and sign where requested!*

Information about the Youth Participant and Activity

Name of Youth participant: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone number: (____) _____ Email Address: _____

4-H county: _____ Birthdate: _____ Grade: _____

Name of activity/event: Family Camp

Name of 4-H group sponsoring or participating in this event: Somerset County 4-H

Location of event: Lindley G Cook Camp

Date and time of participation of individual named above: June 3-5 2022

Parent Permission and Release of Liability

I hereby give my son/daughter named above permission to participate in the event listed. Although Rutgers Cooperative Extension and its event coordinator(s) will use the utmost precaution in guarding the health of the above participant and preventing accidents, I release them from any liability in case of illness or injury as a result of this activity. Furthermore, I release the owner and driver of the car transporting my child to and from the event, from any liability in case of illness or injury.

 Signature of parent or guardian: _____

Medical Emergency Authorization and Health Information

I authorize the event coordinator(s) to dispense the prescription drugs and/or over the counter medications listed below in accordance with the instructions provided on the label (prescription drugs) or below (over-the-counter medications). In case of sudden illness or an accident to the above named participant requiring immediate treatment or surgery while he/she is a participant in this activity, I authorize the 4-H chaperone(s) to take such action as seems appropriate to protect the health and physical well-being of the above participant. This authority extends to any physician(s) and/or surgeon(s) selected by the event coordinator(s) to perform medical and/or surgical procedures including examinations and tests necessary to preserve the health and physical well-being of the above named participant. All efforts will be made to contact the parent(s) or guardian(s) in case of emergency.

Name of parent/guardian _____ Phone number _____ Name of additional emergency contact _____ Phone number _____

The following information is provided as an aid to the event coordinator(s) in dealing with the well-being of the participant. The participant has the following health conditions: (include allergies, handicaps, diabetes, pregnancy, asthma, medications needed, etc.).

Health conditions: _____

Medications/Instructions: _____

Health Insurance: Company Group# _____ ID# _____

 Signature of parent or guardian _____

Continued on other side

New Jersey 4-H Code of Conduct



The primary purpose of the New Jersey 4-H Code of Conduct is to ensure the safety and well-being of all participants at 4-H sponsored events and activities. It applies to all participants, with participants defined as 4-H members, their parents, and volunteers.

As a participant in the 4-H program, I will:

- **Conduct myself in a courteous manner and treat members, parents, 4-H volunteers, Extension staff, judges and others with respect. Appropriate language and behavior are expected at all times.**
- **Respect and adhere to the rules and guidelines of the 4-H program including all those specific to a 4-H event or activity.**
- **Uphold an individual's right to dignity by supporting an environment of inclusion which welcomes involvement of participants from all backgrounds.**
- **Accept supervision and support from county and state 4-H staff while participating in the 4-H program. This includes acceptance of supervision and support from appointed 4-H volunteers coordinating 4-H events and activities.**
- **Obey local, state and federal laws.**

Participants who fail to adhere to the New Jersey 4-H Code of Conduct are subject to a range of disciplinary actions. Such actions will be taken in compliance with the New Jersey 4-H Discipline Policy and Procedure. When appropriate, immediate corrective action will be taken at the 4-H event to ensure the safety and welfare of all participants.

I understand if I fail to adhere to the above Code of Conduct, I will be subject to disciplinary action and potentially prohibited from attending and participating in the New Jersey 4-H Youth Development program.

	_____	_____
	Signature of participant in event	Date
	_____	_____
	Signature of parent or guardian	Date

New Jersey 4-H Media Policy and Release

The 4-H program routinely promotes activities through various media. This includes, but is not limited to newsletters, newspapers, brochures, and displays. In doing so, the names and photos of members may be included to help tell the 4-H story. However, New Jersey 4-H policy is that on web sites, youth in photos will not be identified by name(s).

- No, do not use my individual picture for any purpose.** I will make an effort to avoid opportunities to be in group photos.
- No, do not use my name for any purpose.**

Revised: January 2013

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New Jersey 4-H Release/ Agreement Form for Adults



Both sides of this form must be completed and signed by all adults participating in 4-H overnight activities, field trips, and events requiring group transportation where youth are present, or any other events sponsored through the 4-H Youth Development Program as determined by the event coordinator. The form should be submitted prior to the event.

Information about the Adult Participant and Activity

Name of Adult participant: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone number: (____) _____ Email Address: _____

4-H county: _____ Have you gone through the appointed volunteer process? Yes No

Name of activity/event: _____

Name of 4-H group sponsoring or participating in this event: _____

Location of event: _____

Date and time of participation of individual named above: _____

Release of Liability

Although Rutgers Cooperative Extension and its event coordinator(s) will use the utmost precaution in guarding the health of all participants and preventing accidents, I release them from any liability in case of injury as a result of this activity. Furthermore, I release the owner and driver of the car transporting me to and from this event, from any liability in the case of illness or injury.

 Signature of adult participant _____

Medical Emergency Authorization and Health Information

In case of sudden illness or an accident to myself requiring immediate treatment or surgery while I am a participant in this activity, I authorize the 4-H event coordinator or other adults present to take such action as seems appropriate to protect my health and physical well-being. This authority extends to any physician(s) and/or surgeon(s) selected to perform medical and/or surgical procedures including examinations and tests necessary to preserve my life and well-being. All efforts will be made to contact the individual named as my emergency contact above in case of emergency.

_____	_____	_____	_____
Name of emergency contact	Phone number	Name of additional emergency contact	Phone number

The following information is provided as an aid to the event coordinator in dealing with my well-being. I have the following conditions (include allergies, handicaps, diabetes, pregnancy, asthma, medications needed, etc.):

Health conditions: _____

Medications/Instructions: _____

Health Insurance: Company Group# _____ ID# _____

 Signature of adult participant _____

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Signature of participant

Date

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