2017 Michigan 4-H Animal and Veterinary Science Camp
June 26-30, 2017 at Michigan State University Campus and Beyond!

Applications due April 3, 2017 by 5 pm

The Michigan 4-H Animal and Veterinary Science Camp is a five-day pre-college program held at Michigan State University (MSU) in partnership with MI 4-H Youth Development, MSU Department of Animal Science and MSU College of Veterinary Medicine. Youth will explore fields relating to animal and veterinary medicine as well as participate in numerous hands-on learning activities. Participants will also gain animal handling experience while having the opportunity to visit and explore MSU farms and facilities. Throughout the week, youth will work their way through a veterinary science case study as a team and will create a presentation to be critiqued by veterinarians. This is a fun and interactive camp that will allow youth to examine situations, ask questions and problem-solve. Additionally, this camp will help youth explore various animal related career fields while also reflecting on their experiences and communities.

Who Should Attend:
Michigan 4-H Animal and Veterinary Science Camp is for youth (13 to 16 years of age as of January 1, 2017) who are interested in exploring animal and veterinary science related activities.

Cost:
The registration fee includes all meals, lodging, transportation around camp and camp materials. The cost per youth is $350.

Registration Deadlines:
• Applications due by 5 pm Monday, April 3.
• All applicants will be notified of the selection committee’s decision by April 28, 2017 with a mailed letter. Those youth accepted into the camp will also receive additional payment information at that time. A waiting list will also be determined based on application scores.
• Payment is due by May 19, 2017.

Cancellation Policy:
Once the selection process is completed by the 4-H staff, the cancellation policy for all participants is:
• No refunds will be given after June 1, 2017.

Selection Process:
Space is limited! Up to 50 youth will be admitted!
Selection is based on:
• Youth meeting correct age requirement
• Fully completed application with all signatures
• Responses to short-answer questions
• Optional one-page cover letter
*Please note, only the short-answer questions and optional cover letter will be reviewed by selection committee members.

Where and When:
The 4-H Animal and Veterinary Science Camp begins with check-in on Monday, June 26, from 12:30 to 1:50 p.m. and runs through noon on Friday, June 30. Overnight lodging is part of the camp and will be at Shaw Hall on the campus of MSU. The camp will take place both on and off campus with visits to MSU farms and facilities, and much more!

The camp agenda will be mailed to camp attendees with additional information for attending the camp.
Michigan 4-H Animal and Veterinary Science Camp Application

Please fill out form completely (type or print legibly)

Full Legal Name: __________________________________________

Gender: Male ____  Female ____

Age as of Jan. 1, 2017: _______  Birth Date (mm/dd/yyyy): _____/_____/

Expected high school graduation year: ______________

Status: Youth (not a 4-H member): ____  Youth (4-H member): ____

Number of years in 4-H (include current year): ____________

Address: ________________________________________________

City: __________________________ State: _______ Zip code: ___________

County of residence: _______________________________________

Phone number: (_____) ___________ Cell phone number: (_____) __________

E-mail: ________________________________  Adult T-Shirt Size: ______

Name as you want printed on name badge (if different from above):

________________________________________________________

________________________________________________________

What is your ethnicity?  Residence Description: (Check One)

___ Caucasian/White  ___ Urban

___ Black/African American  ___ Suburban

___ Native Hawaiian/Pacific Islander  ___ Rural, but not on a farm

___ American Indian or Alaskan Native  ___ Farm

___ Asian

___ Hispanic or Latino

___ Multicultural
Meals and Special Needs:

**Status** (check only if applicable):

___ Special dietary needs, please describe: ________________________________

___ Wheelchair user

___ Other special needs, please describe: ________________________________

Lodging:

Males and females will be housed separately (youth with youth; adults with adults) with two youth per room (two beds). We will honor roommate requests when possible. When a roommate is not requested, one will be assigned by camp staff (by county when possible).

I would like to room with:

Name: ___________________________ County __________________________

Camp Costs:

Rates include meals, lodging and program fees.

**Total Camp Cost - Amount to be paid by participant if admitted:** $ 350.00

How did you learn about 4-H Animal & Veterinary Science Camp? (ie. through the county 4-H office, through social media, from a friend, etc.).

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Event Rules:

The Michigan 4-H Animal and Veterinary Science Camp is a highly esteemed educational event, which means that there is an expectation that all of the participants will dress and behave appropriately. Please keep in mind that you will be representing yourself, your county and the Michigan State 4-H Youth Development Program.

Positive behavior is a key expectation for youth and adults in state-sponsored 4-H activities – behavior that reflects trustworthiness, respect, responsibility, fairness, caring and citizenship. Participants are expected to follow all the workshops 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.** Youth participants are not permitted to use tobacco in any form. If it is determined by 4-H staff or person in charge of the activity that the offense warrants it, the offender will be turned over to the proper authorities.

All youth and adult participants should:

- Actively involve themselves in all the sessions and attend the entire event.
- Wear name badges so that they are visible at all times (except when swimming or sleeping).
- Treat all areas of the camp facility (such as dorms, buses, vans, meeting rooms, sleeping rooms, restrooms, dining area and outdoor areas) with respect. This means they should pick up after themselves. Repair costs for damage incurred to property will be billed to the group or individual responsible for such damages.
- Be responsible for your own belongings. Valuables, such as expensive jewelry and electronic devices, should be left at home. 4-H Youth Development is not responsible for any lost or missing items.
- Handle all animals and equipment with care. Practice patience while working with live animals.
- Participants may not have visits from people not associated with the program. Participants are not to visit housing areas that are not assigned to them. Housing areas are set up as all female and all male areas. Participants are not permitted in the housing areas assigned to members of the opposite sex. The only exception is a brief delegation meeting that is prearranged by the 4-H staff.
- Inappropriate sexual behavior including intimate physical/sexual contact or such attempts is strictly forbidden, along with discrimination regarding political beliefs, marital status, family status or veteran status. Don’t use vulgar language (for example, swearing).
- Participants are not allowed to use cameras and other digital recording devices during camp sessions and farm visits unless otherwise authorized. Additionally, it is prohibited to use devices where privacy is expected by participants (showers, restrooms, locker rooms, etc.).
- Not leave the program grounds except for field trips arranged as part of the program under the supervision of staff.
• Observe the curfew. At 11 pm, all participants must be in their assigned rooms for the night. Chaperones will do a room check each night at this time to account for each participant. Everyone should be quiet within his or her assigned room by 11:30 pm (participants wishing to go to sleep before 11 pm can let their chaperone know so they may be bed checked earlier).

• Observe quiet hours, which are from 11 pm to 5:30 am.
• Report accidents immediately to the program coordinator.
• Participants may not gamble for money or other items.

Dress:
• Participants should dress appropriately for the itinerary. Unacceptable attire includes clothing that:
  o Exposes undergarments or excessively exposes the body (such as cropped, low-cut or extremely tight shirts, tube tops, short-shorts, excessively baggy or extreme low-rise pants).
  o Conveys a violent, offensive, obscene message or image.
  o Promotes use of an illegal substance.
• Shirts and shoes must be worn in eating areas.
• Daytime: Closed toed shoes and pants are required during all daytime activities. Appropriate clothing is required at all times including when working with animals. It is important to look respectable when visiting farms and speaking with industry representatives. Appropriate length shorts are an acceptable form of pants (fingertip rule for length).
• Evenings and recreation: Casual clothes including t-shirts, jeans, sandals, flip-flops or sports clothes.
Required Signatures (4 pages):

Event Rules (Required for all youth participants)
I have read and agree to abide by the event rules included in this application.

Participant’s signature ________________________________ Date ____________

I expect my child to abide by the included event rules. I understand that if my child does not abide by these rules and the Michigan 4-H Code of Conduct that I may be asked to pick up my child early from this program.

________________________________________________________ Date ____________
(Parent or legal guardian’s signature)

Parent/Guardian Consent (required for all youth participants)
I hereby grant permission for (print participant’s name) ________________________________ to participate in all educational and social activities of Michigan 4-H Animal and Veterinary Science Camp sponsored by Michigan State University (MSU) Extension 4-H Youth Development.

I understand that field trips are a key learning component of this camp and that my child will be transported as part of the group to various sites by MSU bus or a minivan driven by a MSU staff member. I understand that some campus facility tours and other recreation activities have special risks. I have reviewed the schedule and I accept any risks associated with the activities.

Name of Parent/Guardian (Please print) ________________________________

Signature ________________________________ Date: ____________

4-H Overnight Housing Permission Form
I understand that my child will be sharing lodging with other campers of the same gender. Chaperones of the same gender will be housed nearby. Each camper will share a room with one other camper between 13 and 16 years of age. All chaperones go through a reference check, selection process and criminal history check. By signing this form, I give my permission for my child to attend this event under these lodging conditions.

________________________________________________________ Date: ____________
(Parent or legal guardian’s signature)

Youth Code of Conduct/ Media & Medical Release Form
To attend the camp, please complete the enclosed required sections including the Code of Conduct, Evaluation Acknowledgement, Media Release, Medical Information and Official Medical Treatment Authorization. If you are a current Michigan 4-H member and your MI 4-H code of conduct, media release, and medical authorization forms already exist within 4-HOnline, you skip the next three pages. Non 4-H members must complete the form and mail it in with the application to complete the selection process.
Michigan 4-H Youth Authorization and Acknowledgement Form

Participant Name: ____________________________________________
County: ________________________________ Program Date: June 26-30, 2017

Instructions: This two-page form is required for participation in Michigan State University Extension 4-H youth programs. Each section requires a separate authorization.

SECTION 1 - Required
Michigan 4-H Code of Conduct

Participation in Michigan 4-H programs is subject to the observance of the program rules. Any participant who knowingly violates this Code of Conduct is subject to discipline, up to and including removal from the activity he or she is participating in (at his or her own expense) or the entire county 4-H program. Determination of disciplinary action shall be done with input from the volunteers and staff overseeing the program or activity. Final decisions about discipline will be made by the MSU Extension staff.

Michigan 4-H members will:
• Show respect for, and cooperate with, fellow members, volunteers and staff.
• Follow 4-H policies and procedures when participating in any 4-H sponsored event.
• Under no circumstances, commit or threaten violence toward any individual, group or the program.
• Under no circumstances, possess, sell or consume alcohol or possess, sell or use controlled substances at an MSU Extension 4-H youth activity or event.
• Under no circumstances, attend or participate in an MSU Extension 4-H youth activity or event under the influence of alcohol and/or controlled substances including tobacco, electronic cigarettes, etc.
• Under no circumstances, bring dangerous or unauthorized materials (such as explosives, weapons or similar items) to an MSU Extension 4-H youth activity or event.
• Abstain from harassment or bullying of another participant, volunteer or staff member (either in face to face interactions, through social media or other communication venues), particularly when the behavior is disrespectful as regards a person’s gender, race, age, sexual orientation, religion, national origin, disability or appearance.
• Not cheat or falsely represent efforts related to 4-H project activities.

I have read and I understand the Michigan 4-H Youth Code of Conduct. I agree to abide by the rules stated above. I understand I may be removed as a participant from the activity or program, if I fail to follow these rules.

Participant Signature: ________________________________ Date: ______________
Parent/Guardian Signature: ________________________________ Date: ______________
Parent/Guardian must sign if participant is under 18.

SECTION 2 - Required
Evaluation Acknowledgement

As a participant in the Michigan State University Extension/ 4-H program, your child may be asked to help with the evaluation of the program. Your child may be asked to complete a short survey about what he/she learned or did as a result of the program. Surveys could be given before the program begins and/or after the program has ended. Surveys typically take no more than 10 minutes to complete. All surveys are confidential. Youth are not required to participate in a survey. If you or your child does not wish to participate, it will not affect involvement in any programs of Michigan State University. If you do not want your child to participate in program evaluations or have questions about the evaluation, contact your local 4-H coordinator at the MSU Extension Office. By signing below I acknowledge that my child may be asked to participate in a short program evaluation. I understand that program evaluations are completely voluntary.

Parent/Guardian Signature: ________________________________ Date: ______________

(Participant must sign if over 18.)
Michigan 4-H Youth Authorization and Acknowledgement Form - Page 2

Participant Name: ________________________________________________
County: ____________________________ Program Date: June 26-30, 2017

SECTION 3
Media Release
I authorize Michigan State University Extension/4-H to record my image and/or voice for use by Michigan State University Extension or its assignees in research, education, and promotional programs. I understand and agree that these audio, video, film, and/or print images may be edited, duplicated, distributed, reproduced, broadcasted, and/or reformatted in any form and manner without payment of fees in perpetuity.

Parent/Guardian Signature: ______________________________________ Date: ____________
Participant must sign if over 18.

SECTION 4
Medical Information
Participant’s full legal name: __________________________________________
Birth date: __________________________ Phone: ___________________________
Parent phone home: (_______) __________________________ Parent phone work: (_______) __________________________
Parent phone cell: (_______) __________________________
Mailing address: _________________________________________________
Primary care physician’s name: ________________________________________ Physician’s phone: (_______) __________________________
Physician’s address: _________________________________________________

INFORMATION NEEDED ABOUT PARTICIPANT (Required):

Yes No If yes, please list/explain below. Attach additional sheets if needed.

☐ ☐ Does the participant have any chronic health problem or illness?

☐ ☐ Does he or she have any acute illness now?

☐ ☐ Has the participant been treated recently for some medical problem?

☐ ☐ Is the participant taking any medications for treatment of a medical problem?

☐ ☐ Does the participant have any allergies to medication or local anesthetics?

☐ ☐ Does he or she have any allergies?

Please disclose any other disabilities or special needs your child has, that could affect their ability to have a positive experience.

______________________________________________________________

Date of child’s last tetanus shot: __________________________

HEALTH INSURANCE INFORMATION (Strongly Encouraged):
Policy holder’s name and relationship to participant: ________________________________________________
Policy holder’s address: ________________________________________________
Please attach a photocopy of both sides of your insurance card (preferred) OR complete the information requested here:
Insurance company phone number: (_______) __________________________
All policy numbers (please identify): ________________________________________________
If you have HMO insurance, please list emergency treatment authorization phone number: (_______) __________________________
Employer’s name and address: ________________________________________________

SECTION 5- Required
Official Medical Treatment Authorization
I recognize that while attending this program, medical treatment on an emergency basis may be necessary for my child, and I further recognize that volunteers or staff overseeing the program may be unable to contact me for my consent for emergency medical care. I do hereby consent in advance to such emergency care, including hospital care, as may be deemed necessary under the circumstances and to assume the expenses of such care. I also authorize the medical facility to release any and all information required to complete insurance claims and also authorize insurance payment directly to the medical facility.

Parent/Guardian Signature: ______________________________________ Date: ____________
(Participant must sign if over 18.)
SECTION 6- Required

I grant permission for my child to participate in all 4-H clubs, groups, education, social activities, and projects and (“Experiences”) they are enrolled for in 4-HOnline and for which I otherwise seek participation.

I understand that 4-H Experiences may entail field trips and visits to various locations. I also understand that participation in 4-H Experiences carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one Experience to another, but the risks range from (1) minor injuries such as scratches, bruises, and sprains, to (2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions, to (3) catastrophic injuries including paralysis and death.

I further understand that offered 4-H Experiences include those which may pose greater risks. These Experiences include, but are not limited to: shooting sports, equestrian activities, other activities which involve large animals, ATV/UTV activities, outdoor adventure challenges, snowmobiling, boating, motor vehicles and activities involving tractors and other farm implements.

**Shooting Sports**: I understand that some Experiences include the use of firearms, live ammunition, and/or archery equipment. I understand that shooting sports are potentially hazardous activities and entail the risk of serious injury; including, but not limited to, gun shot or archery wounds that could result in blindness, paralysis, loss of limb or life.

**Equestrian/Large Animals**: I understand that some Experiences involve the riding and/or husbandry of large animals. I understand that all animals, even trained animals, can exhibit unpredictable and potentially dangerous behavior. I recognize the riding and or care of large animals entails the risk of serious injury; including, but not limited to, fall, crush and blunt force wounds that could result in paralysis, loss of limb or life.

I have reviewed or will review all of the Experiences that my youth has selected or will select. I understand that by selecting Experiences I am accepting any risks associated with those Experiences.

I understand that my child has a role to play as regards to his or her safety and security. I will speak with my child about the need to listen to instructions, honor safety rules, and to behave responsibly.

If I am a participant who is 18 years of age or older: I have read the risks above, and, in consideration for being permitted to participate in chosen 4-H experiences, I release, waive, discharge, and covenant not to sue 4-H volunteers/leaders, County 4-H Extension Councils/Committees, Michigan State University (collectively, “Releases”), and all officers, directors, employees, agents, volunteers, and contractors of Releases, from any claim, demand, loss, liability, damages, and attorney fees and costs whatsoever arising from, related to, or resulting from the above risks, including those caused by the negligent acts or omissions of any or all of the Releases.

I have read and understand this Consent, Acknowledgement of Risk, Release and Waiver.

___________________________________________________________
Parent/Guardian/Participants 18 years of age or older Signature

___________________________________________________________
Date
Application Questions to be completed by youth applicant:

1. Why do you want to attend the Michigan 4-H Animal and Veterinary Science Camp?
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2. What previous experiences do you have in animal and veterinary science related activities? (no experience needed)
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3. What do you hope to gain from your experiences at camp?
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4. After attending the camp, how do you plan to use what you have learned to help others, your school and your community?
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Timeline:

April 3, 2017 (by 5 pm)
• Michigan 4-H Animal and Veterinary Science Camp Application Packet, including Event Rules, Parent/Guardian Consent, 4-H Overnight Housing Permission Form, Michigan 4-H Youth Authorization and Acknowledgement Forms (signatures required) and optional cover letter are due to Julie Thelen (address below).
  *Applications will not be accepted electronically. Please mail applications ensuring they will arrive by the April 3 deadline. **NO emailed applications will be accepted.**

April 28, 2017
• Youth that apply will be notified of acceptance with a formal letter.

May 19, 2017
• Payment is due – information on where to send payment will be provided at the time youth are accepted into camp (April 28, 2017). Once campers are selected, payment options including payment plans and credit card options will be shared.

Please send applications to:

Julie Thelen
4-H Animal and Veterinary Science Camp
474 South Shaw Lane
Anthony Hall, 1287 G
East Lansing, MI 48824

If you have questions, please contact:

Julie Thelen, MSU Extension Educator
E-mail: thelenju@anr.msu.edu
Phone: 517-432-1626