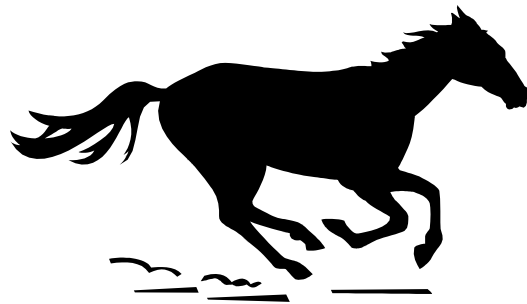


COOPERATIVE EXTENSION



*17th ANNUAL*  
**DISTRICT 6 NORTH 4-H HORSE CAMP**  
*May 1 & 2, 2020*

MUHLENBERG COUNTY AG CENTER  
3705 State Route 1380  
Central City, KENTUCKY



COORDINATED BY:

*Green River Area 4-H Horse Council*

**Cooperative Extension Service**  
Agriculture and Natural Resources  
Family and Consumer Sciences  
4-H Youth Development  
Community and Economic Development

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LEXINGTON, KY 40546



Disabilities  
accommodated  
with prior notification.

## DISTRICT 6 NORTH 4-H HORSE CAMP

### I. OBJECTIVES

- A. To improve the understanding of all phases of the horse industry.
- B. To improve the ability of Kentucky 4-H members in regard to equitation, stable management, horse care, and basic safety precautions for horse, rider, and others.
- C. To develop an appreciation for horseback riding as a healthy and wholesome form of recreation.
- D. To promote greater love for animals and a humane attitude toward them.
- E. To be better prepared for citizenship responsibilities through working in groups and developing leadership, self-esteem, self-reliance, and sportsmanship.

### II. ELIGIBILITY

- A. Any 9 – 19 year old youth involved in the 4-H Horse Program. Youth must be 9 years old as of 1/1/2020.
- B. **Must be pre-registered and prepaid by March 15 to your County Extension Office. This is very important. No late registrations will be accepted. No on-site registrations will be accepted.**

### III. HORSES

- A. **NO stallions of any age will be accepted.**
- B. All horses must have Negative Coggins test dated no more than 1 year prior to the camp and up-to-date health papers. **NO EXCEPTIONS!** The Kentucky Department of Agriculture may be on site.
- C. Any horse and/or rider determined to be sick or unfit by the instructors will not be allowed to participate. A horse with a body condition of less than 4 will not be allowed to participate at camp. This determination is at the discretion of the Green River Area Horse Camp Planning Committee and/or instructors.
- D. All horses that kick will have a red ribbon tied to their tail.
- E. **ALL HORSES MUST BE LED OR RIDDEN AT A WALK TO AND FROM CLASS. VIOLATORS MUST STABLE THEIR HORSES OR GO HOME!**

### IV. GENERAL

- A. Must pre-register and prepay by deadline to have a stall available and for adults to complete local Youth Protection Screening process.
- B. Horse must be fed, watered, stalls cleaned, and tack cleaned daily.
- C. The stalls for each county should remain clean at all times. Stalls will be inspected randomly each day. Compliance is necessary to continue participation. Ratio of 1 adult to every 5 campers is required. Parents are encouraged to attend, but must have completed the Youth Protection Screening.
- D. Campers must be on time to each session.
- E. All non-participating youth must be accompanied by at least one parent or guardian at all times.
- F. **DO NOT EXPECT REFUNDS!** Exception: if a division is cancelled by the Camp Committee, refunds will be made promptly. There must be at least 5 participants per division or the committee has the right to cancel. Special circumstances will be reviewed on a case by case basis by the committee.

### V. LEADERS AND PARENTS

- A. No adult riders are permitted in classes unless instructing or supervising with trail class. These adult riders must be approved by the committee two weeks prior to Horse Camp.
- B. Attend parent, leader, and designated adult meeting each night.
- C. Stay with 4-H members during all of the class periods.
- D. Have full control of 4-H members and non-participating youth and horses during all of the class periods and free time.
- E. Non-participating youth should be supervised by parents or guardian at all times.
- F. Assist with all instruction and supervision as needed by instructor.
- G. Volunteer wherever needed. We will need volunteers at meal times, for stall checks, and with some classes. Camp is volunteer ran, so we all need to pitch in and help out to make it successful!
- H. Campers who are not cooperative will be asked to call their parents for a ride home.
- I. **Adults are not allowed to bring horses for themselves unless granted permission by the committee 2 weeks prior to camp.**
- J. Parents and leaders should discipline on the spot as needed based on camp guidelines.
- K. You can request your child be moved to a less advanced riding class if you feel that it is necessary.

## DISTRICT 6 NORTH 4-H HORSE CAMP Information and Guidelines

1. **BE PREPARED FOR RIDING IN THE RAIN! Bring your own rain gear.**
2. The 17<sup>th</sup> Annual District 6 North 4-H Horsemanship Camp is primarily an educational camp. The fun activities will be related to the horse program. We will have pizza on Friday evening at 6:00 pm. Other meals that are included are Saturday breakfast, lunch, and supper. Camp will conclude by 8:30 pm on Sunday.
3. Telephone numbers that you can leave with your parents, friends, or relatives for emergencies are: Muhlenberg County Hospital – 270-338-8000 and Muhlenberg County Ag Center – 270-338-0313.
4. Overnight camping is allowed. Sleeping will be in designated areas only. Restrooms are available at the facility, but there are no showers. **RV Hookups are available for the weekend at a cost of \$15.00/night.** Please fill out the request form which is attached.
5. One designated adult to three youth is the ratio required for the camp.
6. A basic first aid kit is available at the camp kitchen area.
7. Camp registration will be from 2:00 – 6:00 pm. Please do not arrive before 2:00 pm. and let us know if you will arrive after 6:00 pm. Stall areas will be assigned. Do not unload horse first. Check at registration for location of your stall before unloading your horse/tack. The first assembly for everyone will be at 6:30 pm **(Youth will have the ability to ride in the arena with prior permission from Extension Agent on duty.)**
8. Present your negative Coggins test papers and health certificates at the Registration table. Go to the registration area upon arrival at camp, and you'll receive stall location. Check stalls for any foreign matter and organize the stall before stalling your horse.
9. A parking area will be set aside for vehicles and horse trailers.
10. Food prices for any visitors will be \$5.00 per meal.
11. A vet will be on call, telephone number will be included in the information sent out prior to horse camp. Individuals are responsible for their own vet bill.
12. Please take all problems and concerns to the leaders in charge. Bring up specific concerns at the parent/leader meeting each night. Door prizes will be given and you must be present to win.
13. All campers will be classified between 7:30 – 8:30 pm on Friday. Final classification will be determined by instructors.
14. When unloading horse and equipment, move trailer as soon as soon as unladed to designated parking area.
15. Each camper must have a designated adult who is responsible for the camper at all times during camp.
16. Do not leave horses tied unattended, especially in the wash area.

17. **PLEASE** do not leave the water running at the barn or in the wash area.
18. Remove all manure from the wash area. It stops up the drains.
19. Youth in the campsite area will be under the supervision of 4-H leaders and designated adults from their respective counties.
20. **DO NOT** have extension cords near water.
21. **All horses must be ridden at a walk to and from class. Riders must wear helmets anytime they are on horseback.**
22. **NO Shaving cream or water guns allowed.**
23. All cell phones should be on silent and not used while riding, during classes, or workshops!
24. **Any adult who is not registered to attend camp and/or has not been screened by the Youth Protection Program within their own county 4-H program or any youth not participating in horse camp will be required to leave the grounds by 10:00 pm. NO EXCEPTIONS.**
25. Due to safety concerns, ONLY 4-H youth between the ages of 9 and 19 WILL BE ALLOWED to participate in the 4-H Horse Camp activities!!!
26. No dogs or pets will be allowed!
27. No on-site registration will be available. Must pre-register through your county program.

***Additional Information:***

Stall decorations are allowed, however they will not be judged. Please remember to take the decorations down before you leave.

We will have a costume contest at camp this year. Bring your best horse and rider costume – there will be prizes for the best-dressed and most creative horse and rider costume!

Each county is responsible for bringing at least 1 “horsey” door prize. Please turn this in at the registration desk.

Please fill out a registration form and health form for each person (camper and adults).

**PLEASE DETACH THE ABOVE PAGES AND  
KEEP FOR YOUR RECORDS!**

**Note to Extension Offices:** This form is due to Stacey Potts, Daviess County Extension Office, 4800A New Hartford Road, Owensboro, Kentucky 42303 no later than **March 30**.

## DISTRICT 6 NORTH HORSE CAMPER REGISTRATION FORM

Please fill out completely  
Due March 18 to your County Extension Office.

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

HORSE CLUB NAME \_\_\_\_\_

Have you attended Horse Camp before? YES \_\_\_\_\_ NO \_\_\_\_\_ *If yes, how many years?* \_\_\_\_\_

**4-H members:** Select **one** style of riding.

\_\_\_\_\_ WESTERN PLEASURE

\_\_\_\_\_ CONTEST

\_\_\_\_\_ TRAIL RIDING

\_\_\_\_\_ BEGINNERS BASICS

\_\_\_\_\_ GAITED/WALKING

Are you: (check **one**)

\_\_\_\_\_ Beginner

\_\_\_\_\_ Intermediate

\_\_\_\_\_ Advanced

(must be minimum of 5 participants per riding style to offer this discipline)

**Child camper t-shirts are FREE.** Additional t-shirts are **\$10.00** and must be pre-ordered.  
Check the summary page to order.

TACK ADJUSTMENTS will be made as necessary unless otherwise specified in writing here:  
\_\_\_\_\_

If you know that you will be arriving after registration is closed, please estimate a time that you plan to arrive: \_\_\_\_\_.

Authorization of Use- I, (print full name) \_\_\_\_\_ hereby grant permission to the University of Kentucky and its affiliates and subsidiaries, including but not limited to the College of Agriculture Cooperative Extension and Agricultural Alumni Association, to interview, photograph and/or videotape me, or my minor child, and/or to supervise any others who may do the interview, photography, and/or videotaping and/or to use and/or permit others to use information from the aforementioned interview and/or the aforementioned interview and/or the aforementioned images in educational and promotional activities for the following without compensation: University Educational Publications/Videos, University Electronics Publications (e.g. World Wide Web), University Promotion/Advertising, Local/national news media (w/permission of the University of Kentucky).

## District 6 North 4-H Horse Camp Health Form

Due March 18 to your 4-H Office

**This form must be completed by everyone attending, including adults and siblings, by **March 18**. Make additional copies as needed.**

NAME \_\_\_\_\_ COUNTY \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_ SEX \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_ AGE \_\_\_\_\_ RACE \_\_\_\_\_  
Please list any current medications \_\_\_\_\_  
\_\_\_\_\_

Check below any condition the 4-H staff should know about:

Heart condition \_\_\_\_\_ Seizures \_\_\_\_\_ Sleep-walking \_\_\_\_\_ Diabetic \_\_\_\_\_  
Homesickness \_\_\_\_\_ Headaches \_\_\_\_\_ (mild or severe) Other \_\_\_\_\_

Please list any allergies \_\_\_\_\_

Please list any *drug* allergies \_\_\_\_\_

Allergic to bee stings \_\_\_\_\_ (mild or severe)

If needed, camper/sibling has my permission to take Aspirin \_\_\_\_\_ Tylenol \_\_\_\_\_ Other \_\_\_\_\_

Date of last Tetanus Immunization \_\_\_\_\_



Disabilities accommodated  
with prior notification.

List any accommodations needed \_\_\_\_\_  
\_\_\_\_\_

Primary Physician \_\_\_\_\_ Phone \_\_\_\_\_

Hospital where Physician practices \_\_\_\_\_ Phone \_\_\_\_\_

### Designated adult for this camper at camp is:

**MEDICAL STATEMENT:** It is necessary for 4-H member to have their parents read, fill in, and sign the following statement.

**I understand that basic first aid will be available at the camp, that the campers will be closely supervised, and that if a serious illness or injury develops, medical and/or hospital care will be given.** However, the camp staff is not responsible in the case of accidental injury or illness. I further understand that in case of serious injury or illness, I will be notified; but if it is impossible to contact me, I give permission, for emergency treatment or surgery as recommended by attending physician. No pre-existing conditions are covered by Health and Accident insurance.

PARENT/GUARDIAN \_\_\_\_\_ HOME PHONE \_\_\_\_\_

WORK PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

***Emergency contact who will know how to locate me if I cannot be reached at the above numbers***

NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

**RESPONSIBILITY:** Neither the camp, sponsors, nor camp personnel will be responsible for any accident or injury to the person of any 4-H member, spectator, attendant, other persons, or animal. The 4-H member agrees to indemnify the camp and any sponsors against any claim or liability for damage caused by him or his animal. Classes will be taught and supervised by trained professional instructors and volunteer leaders. **You or your county 4-H club/program must carry your own insurance.** I have read and agree with the above statement.

Signed: \_\_\_\_\_ (Parent) \_\_\_\_\_ (4-H member)

***Note to Extension Offices:*** This form is due to Stacey Potts, 4800A New Hartford Rd, Owensboro, Kentucky 42303 no later than **March 30**.

**DISTRICT 6 NORTH HORSE CAMP  
ADULT/SIBLING REGISTRATION FORM**

Everyone attending Horse Camp **MUST** complete this form.  
Please fill out completely

**Due March 18 to your County Extension Office.**

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

Have you attended Horse Camp before? YES \_\_\_\_\_ NO \_\_\_\_\_ *If yes, how many years?* \_\_\_\_\_

Are you a: (check all that apply) Parent \_\_\_\_\_ Sibling \_\_\_\_\_ Planning Committee Member \_\_\_\_\_

**For County Office use only:**

I certify that this applicant has been screened through CPS procedures and is approved by our  
County.

\_\_\_\_\_  
County 4-H Agent or Contact Agent

Must be signed by your County Extension Agent in to certify you have been through Youth  
Protection Guidelines.

**Child camper t-shirts are FREE.** Additional t-shirts are **\$10.00** and must be pre-ordered.  
Check the summary page to order.

If you know that you will be arriving after registration is closed, please estimate a time that you plan to  
arrive: \_\_\_\_\_.

Authorization of Use- I, (print full name) \_\_\_\_\_ hereby grant permission to the University  
of Kentucky and its affiliates and subsidiaries, including but not limited to the College of Agriculture Cooperative  
Extension and Agricultural Alumni Association, to interview, photograph and/or videotape me, or my minor child, and/or  
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use information from the aforementioned interview and/or the aforementioned interview and/or the aforementioned images  
in educational and promotional activities for the following without compensation: University Educational  
Publications/Videos, University Electronics Publications (e.g. World Wide Web), University Promotion/Advertising,  
Local/national news media (w/permission of the University of Kentucky).

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

# 4-H Horse Camp Family Summary- One per Family Only

Due March 18 to your Extension Office

All adults and youth should **fill out one summary per family**. Please include everyone who is attending horse camp and their fees. All payments are due by March 18 to your County Extension Office in order to have a stall reserved.

### Make checks payable to YOUR County 4-H.

Camper Information	# of Campers/Adults	Total Payment
* Camper (9-19 yr) with horse (includes shavings in the stall, meals, snacks, t-shirt, & registration)	Name(s) _____  X \$100 =	
* Adult/Sibling Registration (includes meals and snacks)	Name(s) _____  X \$30 =	
Souvenir Camp T-shirt <b>4-H Camper's shirt is free.</b>	_____ = <u>Camper Shirt Size</u>	<b>4-H Camper's shirt is free</b>
<b>Please list quantity of each shirt size needed below</b>		
(\$10/shirt) YS YM YL Quantity: _____		<b>4-H Camper's shirt is free</b>
(\$10/shirt) S M L XL Quantity: _____	_____ X \$10 = _____	
(\$15/shirt) 2XL 3XL 4XL Quantity: _____	_____ X \$15 = _____	
	Additional shirts are \$10 each (2XL and up are \$15 each.)	\$ _____ TOTAL
RV Hook-up (limited)	<b>\$15</b>	
Each stall has one bag of shavings provided. Extra bag(s) of shavings needed: # _____	X \$6 bag = (Note: Straw bedding is not allowed.)	
<b>GRAND TOTAL</b>	<b>Checks made payable to: Your 4-H Council</b>	\$ _____

Stalls will be locked. You must check in at registration first and provide a copy of your current Coggins before unloading your horse. Stall will be assigned in county/club blocks. It is very important to turn in your registration by the deadline. A county/club summary will be done and stalls assigned accordingly. Let your 4-H agent know if you wish to be stalled by someone particular.

**ASTM Certified helmets are required to be worn by 4-H members on horseback at all times.**

Visitors will pay for meals as they go. See the registration desk for a meal ticket.

I have read this and understand these requirements. \_\_\_\_\_  
(Parent or Guardian's SIGNATURE)