

JR. GRANGE CAMP REGISTRATION FORM

***REGISTRATION FORM MUST BE
COMPLETED BY PARENT OR GUARDIAN***

Please detach this section and send
registration with check for camp fee to:
Deena Stallings/PO Box 3033/ Pasco, WA
99302/ (509)521-1340/***Make checks
payable to: Wooten Junior Grange***

Camper's name: _____

Birth date: _____ Age: _____

Male _____ Female _____

Address: _____

City: _____ State: _____ Zip: _____

***We must be able to contact someone in case of
an emergency***

Phone number: () _____

Second (emergency) number () _____

Name of adult who will pick up child: _____

Phone: () _____

Cell Phone: () _____

E-mail: _____

Camper must check out with camp director or de-
signee' last day of camp

***MUST BE SIGNED BY PARENT OR
LEGAL GUARDIAN***

Signature: _____

Date: _____ Amount enclosed:\$ _____

COMPLETE IF KNOWN:

Sponsoring Grange or Grange member _____

Grange Number: _____ County: _____

*By signing this form we give permission for our
child to go on an off-site field trip. We also give
permission to publish photographs of camp activi-
ties that include our child in brochures, internet,
newspapers and other forms of advertisement.*

HEALTH AND SAFETY

Every possible precaution will be
taken to safeguard your child. This
is the first responsibility and concern
of the camp staff. Understand that
participation at camp is at will and
that it is terminable at any time with
or without cause by either party.
Further understand after your camper
has spent the first night there are no
refunds.

VISITORS NIGHT

Parents and guardians are WELCOME
AND ENCOURAGED to come on
THURSDAY NIGHT to see what their
young campers have learned. The
program begins at 7:30 p. m. There is a
\$5 charge for dinner visitors and a
\$2.50 charge for other meals. There is a
\$10 overnight stay charge. Please check
to see if RVs are allowed overnight.



WOOTEN JR GRANGE CAMP

FOR AGES 9-14

June 25 – June 30, 2017

Registration Fee \$180.



*Camp Themes: Your favorite
sport for each season.*

**Camp Wooten State Park
2711 Tucannon Road
Pomeroy, WA 99347
(509) 843-3708**

**Camp Director: Deena Stallings
(509) 521-1340
campwooten1@gmail.com**

WHAT TO BRING TO CAMP

- * Camp Medical Permission Form
 - * Ideas for program and skits such as musical instruments, entertaining costumes, etc.
 - * Dress clothes for visitors night.
 - * Changes of clothes for the week including plenty of socks and undergarments. Your new school clothes are not appropriate for everyday; old play clothes are best.
 - * At least two pair of shoes are advisable. No open-toed shoes allowed. Remember we play hard and the area is dusty.
 - * Towels for swimming and showers.
 - * Soap, shampoo, toothbrush, toothpaste.
 - * Sleeping bag, blankets and pillow.
 - * Stamped pre-addressed envelopes.
 - * **APPROPRIATE** bathing suit.
 - * Jacket, sweater and/or sweatshirt.
- PLEASE MARK ALL ITEMS** with your name. Every year the director goes home with unclaimed lost and found items. These are donated to charity if not claimed by September.

NOTE TO PARENTS

There is always something to do at Jr. Grange Camp. The daily program includes wholesome activities, healthy exercise and a fun camping experience. The camper will learn about the Grange and make many new friends. Throughout the day they will be encouraged to become leaders and have fun. It is not necessary for the camper nor their parents to be members of the Grange.

WHAT NOT TO BRING TO CAMP

- * No short-shorts, halter tops, flip flops or sandals. No bikinis.
- * No fireworks, knives, laser pointers or weapons.
- * No alcohol, drugs or tobacco.
- * No food, snacks, candy, pop, etc.
- * No boom boxes, no CD or tape players, iPods, mp3 players, absolutely no electronic devices, including but not limited to cell phones and pagers.
- * No money

TIMES TO REMEMBER

ARRIVAL TIME: Sunday, June 25th, 2 p.m. to 4 p.m. **NO CHECK-IN PRIOR TO 2 P.M.**

*** No meals are provided before dinner on Sunday.***

CHECKOUT: Friday, June 30th **BEFORE 10 A.M.**
Please be on time as we must be out of camp by 11 A. M.

www.wootenjrgrangecamp.org



Jr. Grange Camp Medical Permission Form

***MUST BE COMPLETED**

BY PARENT OR LEGAL GUARDIAN*

NO CHILD WILL BE ALLOWED TO REMAIN AT CAMP WITHOUT A SIGNED PERMISSION FORM.

Please make a copy to keep for your records!

We give my child permission to attend Wooten Jr. Grange Camp and agree not to hold the Washington State Grange or camp staff and directors responsible for losses, injury or accidents at camp or in route to and from camp. This is to certify that the bearer of this form has the permission of the undersigned to authorize necessary emergency medical care by attending physicians or others he or she may choose in the event of accidental injury, ingestion or illness. The undersigned accepts all financial responsibility for necessary treatment and services. We further give the camp permission to take my child to the doctor or hospital for emergency medical treatment. The camp nurse is able to give Tylenol/ Ibuprofen/Benadryl to my child if needed Yes___ No ___

Camper's name: _____

Birth date: _____ Age: _____ Boy / Girl

Address: _____

City: _____ State: _____ Zip: _____

WE MUST BE ABLE TO CONTACT SOMEONE IN CASE OF EMERGENCY

Phone number: () _____

Second (emergency) number: () _____

MEDICAL INFORMATION

Insurance Carrier: _____

Policy Number: _____

Date of last tetanus shot: _____

Allergies: _____

Health/Diet restrictions: _____

Medications: _____

Problems we should be aware of: _____

Family doctor: _____ #: _____

Name of parent or guardian _____

Signature: _____ Date: _____

Parent or guardian must sign this form! No one else is to sign the permission form!