

# Washington State 4-H

## Notice of Intent to Administer a 4-H Resident Camp

This notice is to inform the Washington State 4-H Office that \_\_\_\_\_ County is in the process of planning, and plans to operate a 4-H Resident Camp during the 4-H program year ending September 30, \_\_\_\_\_.

Camp Name: \_\_\_\_\_

Location of camp: \_\_\_\_\_  
(Please provide detailed directions if the location is not widely known.)

Dates of camp operation: \_\_\_\_\_

Camp Director Name & Address \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

WSU Extension Camp Administrator \_\_\_\_\_

Please indicate below the contact information for the camp so that the camp director may be contacted, if necessary, during camp. Please note it is a requirement that the camp has immediate communication available during camp operation.

Camp Contact information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please attach a copy of the Risk Management Plan (RMP) developed for this camp. This form, along with the written RMP, must be submitted as required\* in the Washington State 4-H Resident Camp Standards to: Washington State 4-H Office, WSU Puyallup, 7612 E Pioneer Way, Puyallup, WA 98371-4998.

\*From WA State 4-H Resident Camp Standards, Standard 1: If your camp is three days or less in duration and 50 participants or less: 30 days notice. If your camp is more than three days OR involves greater than 50 participants: 60 days notice. This 60-day notification requirement may be reduced to 30 days upon written approval of County 4-H Staff. (This requires notification that the Intent to Administer a Resident Camp will be submitted prior to 30 days.)

I have read the Washington State 4-H Resident Camp Standards and understand these standards must be maintained to ensure the use of the 4-H name and clover and WSU 4-H Liability Coverage.

\_\_\_\_\_  
WSU Extension Camp Administrator Signature

\_\_\_\_\_  
Date Submitted