PRE-CAMP PLANNING FORM*

CAMP_____________________________________________ DATE OF CAMP _____________________________
COORDINATING AGENT____________________________ PHONE _____________________________________

ANTICIPATED ATTENDANCE

<table>
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<tr>
<th>Counties Scheduled</th>
<th>Agent(s) or Volunteer in Charge</th>
<th>Boys</th>
<th>Girls</th>
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CAMP CAPACITY:__________________________________________________   TOTALS: _____________________

CAMPING OBJECTIVES FOR THE WEEK.

1. ________________________________________________________________________________________
2. ________________________________________________________________________________________
3. ________________________________________________________________________________________
4. ________________________________________________________________________________________
5. ________________________________________________________________________________________
6. ________________________________________________________________________________________
7. ________________________________________________________________________________________
8. ________________________________________________________________________________________

CAMP WEEK PLANS - (WHAT/WHO RESPONSIBLE)

Extra Class(es)

Free Time Activities

Our Group's Evening Program

Other Evening Program Suggestions

Intro to 4-H: __________________________________________ 4-H Demonstration: 

Please use the following code after each entry above to indicate who is to assume leadership for the activity: (A) Agent (VL) Volunteer Leader (TL) Teen Leader (CS) Camp Staff (RP) Resource Person. Use small case letters to indicate who will assist the person in charge (same code).

*Use other side if necessary or attach a copy of planned program with assignments. This form is to be mailed to the Camp Director at least 2 weeks prior to the camp date by the coordinating agent only. Please send a copy to the 4-H Camping Office.