The Dryden Recreation and Youth Commission Proudly Presents

Dryden Youth Services
April—June 2019 Programs
SIGN UP NOW—SPACE IS LIMITED!

Programs are for Middle & High School aged youth from the Town of Dryden or attending Dryden schools. All programs run from 2:30 - 5:30 and meet at the Dryden Lion in the Middle School lobby unless. If school is on holiday or cancelled Dryden Youth Programs will not meet unless specified. Programs are generally FREE with donations encouraged to help cover costs. Please make checks payable to Cornell Cooperative Extension. Please bring a water bottle!

Please call 272-2292 ext. 223 if you have any questions.

If you are signing up for more than one program please number your choices. 1 being the program you would like to do the most, 2 second most , etc. *enrollment ‘first come, first served’!

Monday Makers – Mondays April 1– 22. Each week program participants will help decide what we will do and where we will go. Sky’s the limit! Possibilities include local field trips, science experiments, crafts, letter boxing and more.

Cooking for Campers Session 1 - PLEASE SIGN UP FOR 1 SESSION OF Cooking for Campers Tuesdays April 2 & 9. Camp have fun in this cooking program for those interested in learning to eat well in the great outdoors. Please wear rubber boots.

Cooking for Campers Session 2 - PLEASE SIGN UP FOR 1 SESSION OF Cooking for Campers Tuesdays April 23 & 30. Please wear rubber boots.

PRIMITIVE PURSUIT - Thursdays April 4– June 13 Please note that this program will not meet on Thursday May 9th. Learn ancestral survival skills such as friction fires, shelter building, native crafts, tracking & nature awareness. Students must come prepared/dressed to be outside for 3 hrs. Students who come unprepared will be sent home.

Outdoor Crafts—Wednesdays May 1, 15 & 22. Participants can look forward to creating crafts of both function and beauty. Students can look forward to helping to construct a forge that will be used to melt aluminum!

BIRD BRAINS—Tuesdays May 14th—June 11th. We will also meet on Monday May 27th for a field trip to Montezuma National Wildlife Refuge. (Students should meet at the Dryden Middle School entrance at 9:00 am and plan on being picked up at 4:00 PM) Dress for the day and bring lunch. This program will take advantage of the spring migration as we learn to identify birds, listen to their language and become deliberate observers of nature.

Explore Cornell—Mondays May 13, 20, June 3 & 10. Cornell University offers so much to see and experience. Participants can look forward to field trip to interesting places on campus each week.

Fun with Frisbees—Wednesdays May 29—June 12. Do you like to toss a frisbee around with friends? Would you like to figure out how to make one fly straight? Participants can forward to Ultimate frisbee, frisbee golf & frisbee tricks.

Please send completed form to:
David Hall at Cornell Cooperative Extension Tompkins County
615 Willow Ave, Ithaca, NY 14850
(607) 272-2292 ext. 223 © 592-5314
Or drop off in mailbox labeled ‘Dryden Youth’ in the Dryden Middle School Office

PLEASE SEE THE OTHER SIDE FOR THE PERMISSION FORM!

A program in partnership with
Cooperative Extension
Tompkins County
4-H Youth Development
2019 Dryden Youth Services Spring Program Registration Form
Pre Registration is Required!

You will be contacted only if the program or programs you have registered for are full.

1. Fill out a separate form for each youth & return it with your check. Please remember to make a copy of your form for your own records. Be sure to check the box next to the programs that your child is signing up for.

2. Please make checks payable to Cornell Cooperative Extension. Payment is voluntary and helps to support Dryden Youth Services. No one will be turned away due to inability to pay.

3. Please send registration form and check to: Cornell Cooperative Extension (please refer to the address on the front of this brochure) Or drop off at Dryden Middle School in the mailbox labeled Dryden Youth (before school is out). Please put in envelope if dropping off at school.

Youth Information (Please Print)
Youth Name: ____________________________ Birth date: __________ M/F: ________
Grade: ______ School: __________________________
Address: _________________________________________________________________
Ethnicity: ___Hispanic ___Non-Hispanic
Race: ___Black or African American ___American Indian or Alaskan Native
___Native Hawaiian or Pacific Islander ___Asian ___White ___Prefer Not to State
Residence: ___Farm ___Rural/Town less than 10,000 ___Town/City: 10,000-50,000

Medical Conditions/Restrictions, or special needs? __________________________________________
Allergies? ________________________________________________________________

Parent/Guardian Name: ____________________________ Phone:: (Home)____________________________ (Work) ____________________________ (e-mail) __________________________

Emergency Contact Information Name: __________________________________________
Phone:: (Home)____________________________ (Work) ____________________________

___ Yes, I give permission for my child to fully participate in 4-H Rural Youth Services programs and to ride in Cooperative Extension program van if necessary to get to and from activities, field trips and to transport youth home if necessary.

___ Yes, I give permission for program staff and/or other emergency care personnel to administer first aid or medical treatment in the event of an emergency involving my child.

___ YES if your child requires prescription or over the counter medication during the trip, a PRN order must be obtained by your child’s physician, the child must be able to self-administer the medication, which should come in the original container with only the specific dosages necessary for the duration of the trip. Parents must sign the PRN.

___ Yes, I give permission for my child to use a knife for carving and cooking purposes after they have had instruction on safe use and handling.

___ Yes, I give permission for my child to participate in program evaluation activities for the purpose of identifying the program’s value and ways to strengthen and improve it in the future. Activities may include: skills checklists, informal discussion, surveys, observation, or group activities. Any feedback or information gathered will remain anonymous.

___ Yes, I give permission for my child’s photo to be taken during the activity and for any photo to be use for documentation and publicity purposes.

___ If my child is unable to attend a scheduled event, I will alert the program manager at © 592-5314 or 272-2292 ext. 223

___ I understand that my child should bring a water bottle to program.

___ If eligible, I give my child permission to participate in Lunch Bunch, which meets during the academic lab portion of their lunch period.

___ I understand that supervision of my child ends at 5:30.

___ Yes, I understand that my child should dress appropriately for the programs that they are attending.

___ By signing this form I acknowledge that my child is enrolled in the Tompkins County 4-H.

___ I fully understand and acknowledge that there are inherent risks and dangers in my child’s participation in the above activities and my child’s participation in such activities and use of any equipment related to such activities may result in injury, illness, or death, and damage to personal property. I understand other participants, accidents, forces of nature, or other incidents may cause these risks and dangers and I hereby accept these risks and dangers.

Parent/Guardian Signature: __________________________________________ Date: __________

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