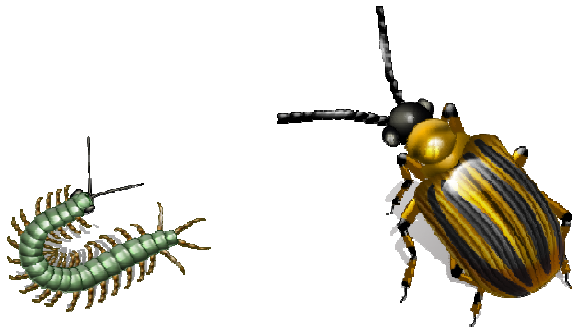


Come explore Agriculture in a fun and exciting way



Learn about insects in nature



& a Night Hike!

Come Camp with Us Under the Stars at the Hurstville Interpretive Center



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Cooperative Extension Service, Iowa State University of Science and Technology, and the United States Department of Agriculture cooperating.

Science Under the Stars

Youth entering 5th – 7th grade
Fall 2009

June 25th-26th
5:00 PM - 8:00 AM

Hurstville Interpretive Center



Sponsored by:

Jackson County Conservation IOWA STATE UNIVERSITY
University Extension

Who Should Attend?

- Youth currently in 4th-6th grades
- Those interested in learning more about science
- Youth who want to have fun meeting others from across Jackson County

What Will You Do & Learn?

- Participate in hands-on activities related to science and the environment
- Create science concoctions, learn about biodegradable resources, take a night hike, & more!
- Camp out in the Hurstville Interpretive Center

How Much Will it Cost?

- Cost is \$15, includes dinner, breakfast, snacks, materials for activities, & a mug to keep!

Schedule

- 5:00-5:30 PM Registration
5:30- 11:30 PM Camp Activities
11:30-7:00 AM Sleep
7:00-8:00 AM Camp Activity
8:00 AM Camp ends
8:00-9:30 AM OPTIONAL-
additional activities

Registration Form

Youth Name _____

Address _____

City, Zip _____

Phone _____

Parent/Guardian _____

Work phone _____

Cell phone _____

E-mail _____

In case of emergency, notify:

Phone _____

Special Health Considerations (allergies, reactions, current medications, etc.)

Grade Fall 2009 _____

Check below if your child will be staying for the Optional activities between 8:00-9:30 AM on Friday June 19th

_____ Yes _____ No

Activity Restrictions: _____

Child's Doctor _____

Doctor's Phone _____

I have given my child permission to attend Science Under the Stars. However, I agree to pick up my child if the chaperones do not feel my child is abiding by the guidelines. I also understand in case of serious injury or illness, I will be notified, but if it is impossible to contact me, I give my permission for emergency treatment as recommended by the attending physician.

I give permission for my child to have her picture taken to be used for news releases, newsletters, & reports. Please check one:

___ Yes ___ No

Signature of Parent/Guardian _____ Date _____

Return with payment of \$15 by June 19th to:

Jackson County Extension

201 W. Platt St.

Maquoketa, IA 52060

Checks can be made payable to:
Jackson County Extension

If you have any questions please call Jackson County Extension at (563) 652-4923 or email xjackson@iastate.edu.