**4-H Camp Ohio Program Request Form**

**Completed form is due back 14 days prior to your arrival.** Please e-mail Lindsey the completed form to lindsey.campohio@gmail.com or mail to 11461 Camp Ohio Rd. St. Louisville, OH 43071

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| Group Leader Name:       | Name of group:       |
| E-mail address:       | Phone Number:       | Start Date | Leave Date |

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| Date of Program | Time | Number of participants | Number of adults | Age | Program option\* | Number of Naturalist |
|  | To | From |  |  |  |  |  |
| Date |       |       |       |       |       |       |       |
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\*Please check your program guide book for classes that are offered by 4-H Camp Ohio.

**Please send a copy of your schedule with your program request form!**

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| Additional comments:       |