



# CLOVERBUD FALL FESTIVITIES

**October 11, 2017 6:00 – 8:00 P.M.**

Keep your Cloverbuds involved throughout the year by joining OSU Extension and the Crawford County Park District on Wednesday, October 11th at Unger Farm, 1303 Nevada Road, Bucyrus, OH 44820. All youth Preschool- 2nd grade are invited for an evening of fun surrounding this year's theme; APPLES! Youth do not have to be a current Cloverbud 4-H Member to attend so invite a Friend to Join the FUN!



Cost \$5.00 for Each Youth; Activities for the day include apple picking, numerous apple themed activities and crafts, and a light snack. Parents are welcomed and encouraged to stay throughout the event.

Return Completed Registration form & payment by October 6, 2017 to:

OSU Extension Office, 112 E. Mansfield Street, Suite 303, Bucyrus, Ohio 44820

Only **35** youth will be accepted on a **first come, first serve basis**. Any late registrations will depend on number of registered youth. Registration will NOT be accepted over the phone. **Checks should be made payable to OSU Extension.**

**Child's Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ (As of 1/1/17)

**Address:** \_\_\_\_\_ **Current Grade:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Parent's Name:** \_\_\_\_\_

**4-H Club (If Applicable):** \_\_\_\_\_

\_\_\_\_\_ has my permission to attend Cloverbud Fall Festivities Day and participate in all activities. I realize that certain activities involve certain risk, and give permission for my child to be involved in these and other such activities included in the day program. I agree to indemnify Extension and Park District employees and volunteers from claims, other than those of negligence, for damage, loss or injury sustained by my child while at 4-H Cloverbud Day/ Unger Park.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I also give permission to The Ohio State University, OSU Extension, the Ohio 4-H program and Crawford County 4-H program the use photographs, voice and video images of any activity in which my child is involved in any and all public awareness programs of The Ohio State University, OSU Extension, The Ohio 4-H program and Crawford County 4-H program.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



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