How to sign up for 4-H Camp!

2019 Fantastic 4-H Camp Registration

- 1. Go to <a>app.campdoc.com/register/fantastic4hcamp
- 2. Input camper information here:

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	🛈 🔒 htt	tps://app. campdoc.com /!/org/255329/patient/n	ew-profile	⊍ ☆	Q Search		III\ 🗊 🗉
Co	ampDoc	New Participant Fantastic 4-H Camp			kaitlynpeine@gmail.	com 😧 🕩	
+ N	NEW PARTICIPANT	New participant					
		• Tell us about your participant for Fant	astic 4-H Camp				
		* First Name	Middle Name	* Last Name			
		* Say * Date	of Birth				
		Sex Month	n 🗸 Di	ay 🗸 Year	~		
					CONTINUE		

3. Enter your personal contact info below.

*not the camper's info.

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🛈 🔒 ht	ttps://app. campdoc.com /!/home/user-settings/information	▽ ☆	Q Search		III\ 🗉
CampDoc	User Settings / About You		kaitlynpeine@gm	ail.com 😧 🕩	
About You Participants Security Notifications	About You If you want to change the name, email, phone or address associated wiyou are using CampDoc.com for someone other than yourself (e.g. you * First Name * Last * Email Address kaitlynpeine@gmail.com * Phone Number • Mailing Address Enter a location	th your CampDoc.com account, you may r child), please do not enter their informa Name	y do so below. If ation here.	ail.com 🖌 📭	

4. Click register for a new session.

	N Dearch
C Participants at Fantastic 4-H Camp Fantastic 4-H Camp	🔕 kaitlynpeine@gmail.com 💡 🗈
Registration	
Desistantions for Krither are listed below. You may calent a preistantion to view additional details including.	comp contact
information. You may also select additional add-ons.	camp contact
Kaitlyn is not currently registered for any upcoming sessions.	
Ċ AN	C Participants at Fantastic 4-H Camp Fantastic 4-H Camp Registration Registration Registrations for Kaitlyn are listed below. You may select a registration to view additional details, including information. You may also select additional add-ons. Kaitlyn is not currently registered for any upcoming sessions.

5. Find the county where you are enrolled in 4-H.

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Camp	Dđc	Kaitlyn Peine / Register Fantastic 4-H Camp		kaitlynpeine@g	mail.com 😧 🕩	
🐈 Kaitlyn Pe	eine	Select Sessions				
Registratio	on					
Health Pro	file	Q Search all 1 available sessions				
Account						
+ NEW PART	TICIPANT	Camper				
		Douglas County » 2019				
		Sign up for Douglas County 4-H'ers and non 4-H'ers.	Jun 17, 2019	9 - Jun 20, 2019		

6. You are welcome to accept or decline the protection plan offered from CampDoc.

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Car	npDđc	Kaitlyn Peine / Regis Fantastic 4-H Camp	ster			kaitlynpeine@gmail.		
🐈 Kaitl	yn Peine	Protection Plan						
Heal	th Profile	errofile Protect Kaitlyn and their upcoming trip with a protection plan through CampDoc.com.						
Acco	ount	Cancellation and In or interruption pick	terruption. Prepaid de	posits and non-refundable travel	arrangements can be covered in	case of cancellation		
+ NEV	V PARTICIPANT	 or interruption, sickness or injury, or in the event a parent loses their job. Emergency Medical Expenses. Participants will also be eligible for first payer coverage with no deductibles for emergency medical expenses during international and domestic trips, in case of sickness, accidents, evacuation, and transportation home. 						
		If you are flying and want	to protect your airfare.	iust enter the amount of your air	ine ticket below.	in details.		
		Maximum insurable trip o amount. Please note that	ost up to \$15,000. If yo coupons are not cover	u wish to include add-ons, adjus ed through the protection plan.	your tuition below to reflect the o	correct dollar		
		SESSION @			INSURED AMOUNT	PLAN COST		
		Douglas County » 2019 (4 days) 🖋	\$ 📩	€ \$ 0 €	-	\$27.00		
				Totals		\$27.00		
		A Protection Plan will insu	ire \$170.00 for the ses	sions listed above. Would you like	e to purchase a Protection Plan to	day for only \$27.00?		
		Add Protection Pla	an Decline	Protection Plan				

7. Input credit or debit card details to submit payment

	Fantastic 4-H Camp			S Kaluyn Peine 🕑 🛛
🐈 Kaitlyn Peine	Confirmation			
Registration	Transactions			
Health Profile				
Account	ITEM		AMOUNT	
NEW PARTICIPANT	TUITION Douglas County » 2019)	<u> </u>	
			Total:	
			Due now: \$0.00	
	Payment			
	Payment Options			
	Full	None	Other	
	New Method		Ť	
		CREDIT CARD I BANK ACCOUNT		
			51755	
		+ Cord Number		
		Card Number:		
		* Card Number: • Month: * Vear: * CVC;		
		Card Number: Month: Year: CVC:		
		Card Number: Month: Year: CVC: First Name: Last Name:		
		Card Number: Month:		
		Card Number: Month: Year: CVC: First Name: Last		
8 <u>8</u>		Card Number: Month: + Year: + CVC: First Name: First Name: Charges will appear on your bank statement from		
<u>କୁ</u> କୁ ଜୁଷ୍ଟ		Card Number: Month: * Year: CVC: First Name: First Name: Charges will appear on your bank statement fro DocNetwork LLC (Ann Arbor, MI).		

8. At this point you will see the "Successfully Registered

for Camp" note. Please note: there is still more to fill out!



8. Complete the health profile section. Be sure to fill in all of the sections under the red bullet points.

)QC	Kaltiyn Peine / Health Profile Fantastic 4-H Camp	💄 Kaitlyn Peine 👩 🕩
е	Health Profile	Kaitlyn Peine Apr 1, 2010
e	Welcome to the Health Profile for Kaitlyn Peine! For camp specific questions, please contact Amanda Fraunfelter at (913) 715-7020 or <u>amanda.fraunfelter@jocogov.org</u> .	 General Information Diet & Activity
an	Here are some tips to get you started:	 Allergies
	Your answers will save as you type them. You do not have to complete the entire health profile at once.	Medications
	You can navigate between steps by clicking the Previous Step or Next Step buttons at the bottom of the page is may also jump between steps by clicking the step name on the right of the page.	 Over the Counter Medications
	The health profile for Kaitlyn should be completed by May 1, 2019	Health History
	 If there are any changes to the information for Kaitlyn after you have completed this health profile, you may update their records through May 31, 2019. 	InsuranceHealthcare Providers
TE	 On June 1, 2019 this profile will be locked and you will not be able to make further changes unless approved by Fantastic 4-H Camp. 	 Activity Permission Form Authorizations DATES Due: May 1, 2019 Lockout: June 1, 2019 CONTACT Amanda Fraunfelter (913) 715-7020 amanda.fraunfelter@jocogov.org PRINT
vork LLC	0% Complete CONTINUE >	
rms of Use		