

South Dakota Farmers Union Camp Report Form

Date (s) of Camp: _____

County: _____

Total Number of Campers: _____ (please attach camp registration form)

Education Directors Present: Please include contact information for Camp Director

Adult helpers sign below:

Name	Address	City	Zip Code	Email Address	Notes: brought lunch, helped clean up etc.

Please fill out the back of the form for all youth who assisted with camp to ensure credit is given to the appropriate individuals.

Camp Director Signature: _____

