

# Cowboy Camp 2019

## Application Packet

**Camp Dates:** June 10<sup>th</sup>- June 14<sup>th</sup>

**Camp Times:** 9:00 am -12:00 Noon

**Location:** 302 N. Esplanade, Cuero, TX

Cowboy Camp campers should be between the ages of **7 and 12**.

### ***What can you expect?***

Each day at Cowboy Camp is filled with activities that teach and entertain in the “cowboy way”. Some examples of these activities include a photo taken on a real longhorn, leather work, calf roping, horse etiquette, branding, Dutch oven cooking, and cowboy music!

### ***What to wear?***

Campers enjoy many activities during the week that held indoors and out of doors. A 2019 Cowboy Camp t-shirt will be provided for each camper. A big part of the fun is for campers to dress up in their best cowboy duds! Have fun with this and maybe you could win a prize! This is Texas and the weather is warm so you may want to wear sunscreen and a hat.

### ***Snacks***

Campers are given a snack and plenty of water during the day. We round out the week with a fun day of chuckwagon cooking, complete with homemade peach cobbler in a Dutch Oven!

### ***Camp cost***

CTHM has always offered and continues to offer the wonderful experience of Cowboy Camp free of charge to all campers. As corporate sponsorships have declined, we encourage families who are able to make a donation to the Museum to help cover the costs of Cowboy Camp.

### ***Waiting List***

Please be aware that space is limited to 40 campers. We offer a waiting list in case a spot becomes available at any time during the week.



## APPLICATION

Open to all cowpokes ages 7-12. Send in your completed application for the ninth annual Cowboy Camp today! We'll head 'em up and move 'em out at the CTHM building, 302 N. Esplanade, June 10th - 14th, from 9:00 to 12:00 noon.

Please submit your application. Email to: [info@chisholmtrailmuseum.org](mailto:info@chisholmtrailmuseum.org) or mail to CTHM PO Box 866 Cuero TX 77954.

Telephone: 361.277.2866. Remember, space is limited!

Name \_\_\_\_\_ DOB \_\_\_\_\_ AGE \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Shirt size (please circle one): YS YM YL YXL AS AM AL

1. What skills and abilities do you have that would be useful on a real trail drive in the 1800's?

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2. Okay, you've signed on as a rail hand on a drive to Missouri from DeWitt County, TX in 1866. You will be outdoors in all kinds of weather for 2 months or more. What clothing and gear will you pack? Remember, you've got to carry everything in your saddlebags and blanket rolls on your horse.

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3. Identify some hazards and dangers you might encounter on the trail and how you would handle them.

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# Activity Permission & Medical Release Form

Camper Agreement- **This section should be filled out by the camper**

I, \_\_\_\_\_ will obey all directions and rules given by the Cowboy Camp Staff. If I break any rules, I understand that I could be sent home or not allowed to participate in certain activities during the remainder of camp.

\_\_\_\_\_  
Camper Signature

\_\_\_\_\_  
Date

Parent Permission- **This section requires parental attention**

My son/daughter \_\_\_\_\_ has my permission to participate in activities at the Cowboy Camp in Cuero, Texas from June 10-14, 2019. IN the event of a medical emergency, I hereby give permission to the Chisholm Trail Heritage Museum Cowboy Camp Staff to secure proper treatment for the registered camper named on this form. I also agree to pay for any fees incurred, and I understand that Chisholm Trail Heritage Museum Cowboy Camp and its staff will not be held responsible or liable for any related expenses.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

## Emergency Information

Camper's Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

Mailing address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian names \_\_\_\_\_

## Other Emergency Contacts

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relation \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relation \_\_\_\_\_

## CTHM Internet Website and Media Permission Slip

I hereby give permission to:

1. May we photograph your child? Yes [ ] No [ ]

2. May we publish your child photograph on the Website or Media? Yes [ ] No [ ]

\_\_\_\_\_  
Parent / Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Camper

\_\_\_\_\_  
Date

### Insurance Information

**THE CAMPER'S FAMILY INSURANCE PLAN IS THE PRIMARY SOURCE OF COVERAGE FOR ACCIDENTS.**

### Medical Information

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Activity Restrictions? \_\_\_\_\_

Allergies: \_\_\_\_\_

### Medications:

Current Medications: \_\_\_\_\_

### Waiver Form:

I hereby authorize the staff of Chisholm Trail Heritage Museum to act for me, according to its best judgment, in any medical emergency, and I hereby waive and release Chisholm Trail Heritage Museum from any liability or illness incurred while my child is attending the Cowboy Camp.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date