

Do you want to be prepared for your first show or judging contest? Let us help you. Attend the 6th annual SDSU Dairy Camp, the Wild Wild West, and we will show you how to rope in your calf's potential

This year you will have many opportunities for "HANDS ON" learning experiences. You will show and fit your own animal. Top prizes will be given for showmanship and judging with prizes for everyone.

If you are 8 to 18, you are invited to attend. Cost of this three day adventure is only \$50 which includes housing, meals, and supplies. Just download the registration form and the liability form from our website and mail it in with your money. (No refunds) **Deadline for registration is May 23rd.**

Each camper is advised to bring their own fitting equipment or find someone to share their equipment with. They will need pillow and a sleeping bag. Also bring a clean coffee can to make homemade ice cream.

Past Sponsors:

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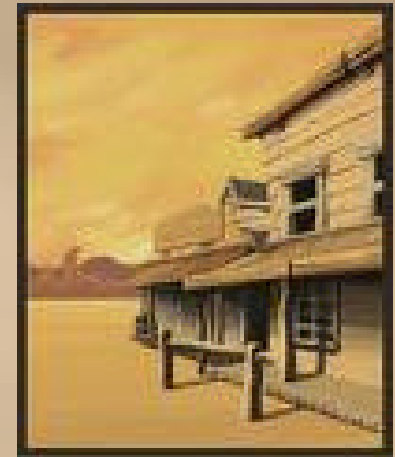
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**A big THANK YOU to all
our sponsors for supporting
the future of the dairy
industry!!!**

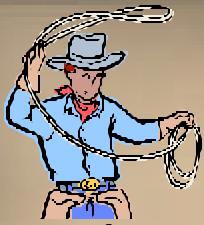
WANTED

Join the SDSU
Dairy Camp
Roundup



**June 6th- 8th,
2008**

Brookings, SD



Wild Wild West



June 6th – Rope Em' In

- 1:30-3:00 Registration, check-in at Dormitory
- 3:00-5:00 Dairy Farm Tour
- 5:00-6:00 Pizza Party
- 6:00-6:30 Pedigree Reading
- 6:30- 8:00 Calf Auction
- 8:00-10:45 Movie/Popcorn Night
- 11:00 Lights Out

June 7th – Brand Em'



- 7:00 Wake-Up Call
- 7:30-8:00 Breakfast at the Farm
- 8:00-12:00 Breakout Sessions
 - Fitting
 - Showing
 - Judging
 - Oral Reasons
- 12:00-1:00 Dinner
- 1:00-3:00 Dairy Plant Tour
 - Making ice cream in coffee cans
- 3:00-4:30 “Hands on” work with heifer
- 5:00-6:00 Dinner
- 6:00-8:00 Farmer Olympics
- 8:00-10:30 Free-time or work with heifers
- 11:00 Lights Out

June 8th – Let Em' Loose

- 7:00 Wake-Up Call
- 7:30 Breakfast at the farm
- 8:00-9:00 Animal preparation
- 9:30-11:30 Competitions
 - Dairy handling
 - Judging
 - Oral Reasons
 (At the SDSU Dairy Farm)
- 11:30 Awards Ceremony
- 12:00-1:00 Dinner

*Parents are invited to come early to watch showmanship, judging, and have dinner with us.

To register:

Call: John Temme at
(402) 518-0209

Email:
sdsu_dairyclub@yahoo.com

Call SDSU Dairy Science Dept.
at 605-688-4116

Or go to our **website:**
<http://dairysci.sdstate.edu>

South Dakota State University
You can GO ANYWHERE from here.

2008 SDSU Dairy Camp
June 6th – 8th, 2008
Hosted by the SDSU Dairy Club

Registration Form

Name_____

Address_____

City, State, Zip_____

Telephone (____)_____ Email_____

Age as of Jan, 1, 2008_____ Expected Year of High School Graduation_____

County_____

(Please Circle Choices) **Youth Shirt Size: M – L; Adult Shirt Sizes: S – M – L – XL**

Level of Showing Experience: **Novice, Intermediate, or Advanced**

Have you ever given oral reasons in a contest before: **Yes** or **No**

Please send the registration form, liability form and \$50 registration fee by May 23rd to:

**SDSU Dairy Camp
Dairy Science Department
DM Bldg, Box 2104
Brookings, SD 57007**

If you have any questions, contact John Temme at (402) 518-0209, or email us at sdsu_dairyclub@yahoo.com

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF THE RISK AND INDEMNITY AGREEMENT AND CONSENT TO MEDICAL TREATMENT

By our signatures below, we acknowledge that we are aware of, appreciate the character of, and voluntarily assume the risks involved in participating in **The 2008 SDSU Dairy Camp**

By our signatures below, on behalf of ourselves, our heirs, next of kin, successors in interest, assigns, personal representatives, and Agents; we hereby:

1. Waive any claim or cause of action against and release from liability the State of South Dakota, its officers, employees, and agents for any liability for injuries to person or property resulting from participation in the activity listed above;
2. Agree to indemnify and hold harmless the State of South Dakota, its officers, employees, and agents for any claims, causes of action or liability to any other person arising from participating in the activity listed above;
3. Consent to receive any medical treatment deemed advisable during participation in the activity listed above; and
4. Acknowledge that we are signing below as a minor child and as the parent or legal guardian of the minor child named below.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF THE RISK AND INDEMNITY AGREEMENT AND CONSENT TO MEDICAL TREATMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Minor's Name _____ Date of Birth _____

Signature _____ Address _____

I HAVE READ THIS RELEASE

Parent/Guardian's Name _____ Date of Birth _____

Signature _____ Address _____

I HAVE READ THIS RELEASE