



The Chisholm Trail Heritage Museum

Open to all Cowpokes, ages 7-12. Send in your completed application for the 13th annual Cowboy Camp today! We'll head'em up and move'em out at the CTHM Chisholm Trail building, 302 N. Esplanade , June 20th through June 23rd , 9am to 12 noon. Please submit your application, email to info@chisholmtrailmuseum.org or mail to Chisholm Trail Heritage Museum, P.O. Box 866, Cuero, Texas 77954. Phone (361) 277-2866

Campers Name _____ Age _____

Parent / Guardian _____

Phone / Cell _____

Mailing Address _____

Email _____

T- shirt size (youth x/s) _____ (youth sm.) _____ (youth md.) _____ (youth lrg) _____

(youth x/lrg) _____ (adult sm.) _____ (adult md.) _____

Activity Permission & Medical Release Form

Camper Agreement – This section the camper will fill out.

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 :

My son / daughter _____ has my permission to participate in activities at the Cowboy Camp in Cuero, Texas, from June 20th – June 23rd 2023 . 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:

Campers name _____ age _____ DOB _____

Mailing Address _____ St. _____ Zip _____

Parent/ Guardian Names: _____

In case of emergency , please first attempt to contact:

Name: _____ Phone : _____ Relation _____

CTHM Internet Website and Media Permission Slip:

I hereby give permission to CTHM and its staff :

May we photograph your child? YES () NO ()

May we publish your child's photograph on the Website or media? YES () NO ()

Parent Signature

Date

INSURANCE INFORMATION:

Name of Company.

Group/ID number

The Camper's Family Insurance Plan is the Primary Source of coverage for accidents.

Family Physician: _____ Phone # _____

Activity Restrictions? _____

Allergies? _____

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

It is 1866, and Texas, a confederate state, is on the losing side of the Civil War, and has no resources except for millions of wild Longhorns. Like all families living in Texas at that time your family needs money, and has managed to round up and brand a small herd of Longhorns. If you sell your cattle in Texas you can only get \$5.00 a head; but if you could sell them to Northern states, where there is little beef and plenty of money, you could get \$45.00 a head. Now, there are 1,000 miles of rough trail, populated with Native Americans, bandits, wild animals, and crisscrossed with raging rivers between Cuero and St. Joseph, Missouri where the cattle can be loaded onto rail cars and transported to Chicago, Illinois. You have signed on with Crockett Cardwell to drive your herd along with 1500 other Longhorns to Missouri. You know that there are countless obstacles and dangers you will have to face along this historic drive, but to you, the adventure (and the money) beckons.

Name three problems that you anticipate encountering on this drive and tell how you will prepare to deal with each one.

1.

2.

3.