
3 DAYS. HANDS-ON JUDGING EXPERIENCE. ONE-ON-ONE REASONS COACHING.

OKLAHOMA STATE UNIVERSITY'S
LIVESTOCK
JUDGING CAMP
2018 LJC

Offering two sessions for
Summer 2018!

SESSION I :
June 11-13



SESSION II:
June 14-16



Become a part of the winning tradition!

To download a registration packet, please visit:

www.ansi.okstate.edu/outreach-extension/4-h-and-youth-information

or contact

Rusty Gosz

OSU Extension Youth Livestock Specialist

405.744.6060

rusty.gosz@okstate.edu



3 DAYS. HANDS-ON JUDGING EXPERIENCE. ONE-ON-ONE REASONS COACHING.

OKLAHOMA STATE UNIVERSITY'S
**LIVESTOCK
JUDGING CAMP**

This unique experience will give participants the exciting opportunity to work with some of the most successful livestock judging coaches in the country. Participants will also benefit from personal training by members of the national champion 2017 and already successful 2018 teams.

*Offering two sessions for **Summer 2018!***

SESSION I: June 11-13

SESSION II: June 14-16

Each session is limited to 70 participants. Registration is first come, first-serve.

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CAMP OVERVIEW

The 29th Annual OSU Animal Science Livestock Judging Camp will be conducted at Oklahoma State University in Stillwater, Okla. The camp is open to boys and girls who have completed the seventh grade, and participation will be limited to 70 youth per session.

SESSION I: June 11-13, 2018 **SESSION II: June 14-16, 2018**

- The camp will be led by Rusty Gosz, Dr. Blake Bloomberg and other members of the animal science department faculty and staff, along with members of the OSU Livestock Judging Team. The instruction will include current type in slaughter and breeding beef cattle, sheep and swine; judging livestock in these six categories; live animal and carcass relationships; the use of performance data and preparing and presenting oral reasons. The methods of instruction will include lecture, demonstration, hands-on experience, one-on-one coaching and critiquing and question and answer sessions. Each participant will prepare and present several sets of oral reasons, and at least three sets will be recorded on videotape which the participant will receive. The tape will also include example sets of reasons from college students.
- The youth will have some free time for organized recreation in their dorm facilities. They should bring shoes and attire for athletics and recreation.
- All participants will be housed in the OSU Village Suites, and meals will be catered by OSU Celebrations. Men and women chaperones will be provided. They will be housed in the dormitories with the youth, and they will accompany the youth to all sessions of the camp.

The fee is \$300.00 per person if paid by the June 1 (\$50.00 late fee after June 1).

This includes the following:

- A double room in Village Suites; linen and towels provided.
- All meals provided
- Refreshments and recreation (basketball, volleyball, tennis).
- A DVD of example sets of oral reasons and the participant's oral reasons.
- A copy of the OSU Livestock Judging Manual.
- Insurance and transportation on campus. Each participant will be insured with American Income Life Insurance Company. Coverage will be \$3,000 for accidents, \$500 for dental and \$1,000 for illness.

Checks must be made payable to OSU Animal Science Department and forwarded with the application form, statement of agreement and health release to
OSU Animal Science Department,
ATTN: Rusty Gosz,
Room 201 Animal Science Building
Oklahoma State University
Stillwater, OK 74078

Participants will check in at Village Suites between 8 a.m. and 9:15 a.m. The first camp meeting will begin at 9:30 a.m. in Animal Science Building Room 123. The camp will conclude at the Village Suites at 4 p.m. If you need to come in the night before, please contact Rusty Gosz to make arrangements.

Please duplicate the application packet to meet your needs.

Please provide your participants and their parents with the following phone numbers:

Rusty Gosz – (405) 714-2032 (Cell)

Rusty Gosz – (405) 744-6060 (Work)

Blake Bloomberg - (405) 744-9280

Courtney Mapes - (580) 748-3426

OSU Police Department - (405) 744-6523

APPLICATION FORM

Name of Applicant _____

Address _____

City _____ State _____ Zip _____

Home Phone _____

Cell Phone _____

Email Address _____

(Please print clearly!)

Date of Birth _____

4-H _____ FFA _____

Boy _____ Girl _____

Grade (Entering in Fall 2018) _____

Session I: June 11-13

Session II: June 14-16

Please rank first and second choice.
Participants may only choose one session.

Official OSU Judging Camp T-Shirt

Circle size

S M L XL XXL

The camp is limited to students who have completed the seventh grade. Maximum enrollment for the camp is 70 youth per session.

If you plan to room with a particular camp participant, please list their name _____

REGISTRATION FEES

\$300 per student (\$50 late fee after June 1) Fee includes two nights lodging in the dormitory (linens, towels, wash cloths furnished), seven meals, personal reasons DVD, camp t-shirt, OSU livestock judging manual, transportation on campus, refreshments, entertainment, and insurance. ALL payments due by June 1 or application will be subject to cancellation. No refunds will be offered after June 1.

\$30 additional charge if you plan to stay an extra night on campus

Total Enclosed: \$ _____

Payable to OSU ANIMAL SCIENCE DEPARTMENT Absolute deadline is June 15.

Applicant _____

Parent/Guardian _____

Extension Agent/Ag-Ed Instructor _____

Please mail all application materials and fee check to:

Rusty Gosz
201 Animal Science Bldg.
Oklahoma State University
Stillwater, OK 74078-6051

MEDICAL INFORMATION

Name _____ Sex _____

Date of Birth _____ SSN _____

Address _____

City _____ State _____ Zip _____

Cell Phone _____ Email Address _____

Parent's/Guardian's Name _____

Address _____

City _____ State _____ Zip _____

Cell Phone _____ Home Phone _____

Medical Insurance Co. _____

Policy Number _____

Please describe any physical condition of the child, which precludes physical activity, field work, late night activity, etc.

Current Medications _____

Known Allergies _____

Conditions of Dietary Concern _____

INTERESTED IN BEING A CHAPERONE?

All chaperones receive waived housing and meals. Email rusty.gosz@okstate.edu for an application.

All chaperones will be subject to a background check and pre-approval prior to camp.

THIS FORM MUST BE COMPLETED AND SIGNED BY A PARENT OR GUARDIAN.

Camp Participant _____

1. PERMISSION FOR MEDICAL TREATMENT, RELEASE OF MEDICAL INFORMATION, AND PAYMENT OF MEDICAL EXPENSES.

I REQUEST AND GIVE PERMISSION to the physicians and medical staffs at the OSU Health Center and/or Stillwater Medical Center to treat the above-named participant appropriately, including hospitalization, prescribing medication, and performing emergency surgical procedures.

I AUTHORIZE release of any medical information to the OSU Health Center and/or the Stillwater Medical Center which may be pertinent to any diagnosis or treatment of the above-named participant.

I ACKNOWLEDGE that I have been provided a copy of the UHS Notice of Privacy Practices. I understand that University Health Services may use my health information for treatment, payment and healthcare operations.

I UNDERSTAND that any charges resulting from this medical treatment will be billed to me at my address or to my medical carrier, which is:

Name _____ Policy Number _____

Address _____

NOTE: This judging camp (not the University) has group medical insurance for this program.

Signature of Parent/Guardian _____

2. PERTINENT MEDICAL INFORMATION

Please indicate on the attached form any medical information, which might be important for the program and/or medical staff to know. This form will be photocopied, attached to the authorization for emergency care, and carried on all trips away from campus as well as being placed on file at the OSU Health Center and Stillwater Medical Center.

University Health Services Notice of Health Information Practices

This notice describes how information about you may be used or disclosed and how you can get access to this information. Please review it carefully.

Understanding Your Health Record/Information

Each time you visit a hospital, physician, or other healthcare provider, a record of your visit is made. Typically, this record contains your symptoms, examination and test results, diagnoses, treatment, and a plan for future care or treatment. This information, often referred to as your health or medical record, can serve as a:

- Basis for planning your care and treatment
- Means of communication among the many health professionals who contribute to your care
- Legal document describing the care you received
- Means by which you or a third-party payer can verify that services billed were actually provided
- A tool in educating health professionals
- A source of data for medical research
- A source of information for public health officials charged with improving the health of the nation, as required by law
- A source of data for facility planning and marketing
- A tool with which we can assess and continually work to improve the care we render and the outcomes we achieve

Understanding What Is In Your Record & How Your Health Information is Used Helps You To:

- Ensure its accuracy
- Better understand who, what, when, where, and why others may access your health information
- Make more informed decisions when authorizing disclosure to others

Your Health Information Rights

Although your health record is the physical property of the healthcare practitioner or facility that compiled it, the information belongs to you.

You have the right to:

- Request a restriction on certain uses and disclosures of your information as provided by 45 CFR 164.522. Such requests must be in writing.
- Obtain a paper copy of the notice of information practices upon request
- Inspect and copy your health record as provided for in 45 CFR 164.524. This request must be in writing and presented or mailed to the UHS Privacy Officer.
- Amend your health record as provided in 45 CFR 164.528 * obtain an accounting of disclosures of your health information as provided in 45 CR 164.528 request communications of your health information by alternative means or at alternative locations. Any such request should be directed to the Privacy Officer or designee
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken

Our Responsibilities

University Health Services is required to:

- Maintain the privacy of your health information *provide you with a notice as to our legal duties and privacy practices with respect to information we collect and maintain about you abide by the terms of this notice
- Notify you if we are unable to agree to a requested restriction
- Accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations

We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain. Should our information practices change, we will mail a revised notice to the address you've supplied us. We will not use or disclose your health information without your authorization, except as described in this notice.

For More Information or to Report a Problem

If you have questions and would like additional information, you may contact the Director of University Health Services at (405) 744-7013.

If you believe your privacy rights have been violated, you can file a complaint with the Director of University Health Services or with the Secretary of Health and Human Services. There will be no retaliation for filing a complaint.

Examples of Disclosures for Treatment, Payment and Health Operations

We will use your health information for treatment.

For example: Information obtained by a nurse, physician, or other member of your healthcare team will be recorded in your record and used to determine the course of treatment that should work best for you. Your physician will document on your record his or her expectations of the members of your healthcare team. Members of your healthcare team will then record the actions they took and their observations. In that way, the physician will know how you are responding to treatment.

We will also provide your physician or a subsequent healthcare provider such as a specialist or emergency room physician with copies of various reports that should assist him or her in treating you once you're discharged from this clinic or referred out for additional treatment.

We may use and disclose health information about you (for example, by calling you or sending you a letter) to remind you that you have an appointment with us for treatment or that it's time for you to schedule a regular checkup with us.

We will use your health information for payment.

For example: A bill may be sent to you or a third party payer. The information on or accompanying the bill may include information that identifies you, as well as your diagnosis, procedures, and supplies used. Any charges not paid at the time of services will transferred to the OSU Bursar.

We will use your health information for regular health operations.

For example: Members of the medical staff, the risk or quality improvement manager, or members of the quality improvement team may use information in your health record to assess the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality effectiveness of the health care and service we provide. Information on immunizations may be used to determine compliance with OSU policies on communicable diseases.

BUSINESS ASSOCIATES: There are some services provided in our organization through contacts with business associates. An example would be the transcription of dictated medical notes and certain laboratory or radiology tests. When these services are contracted, we may disclose your health information to our business associate so that they can perform the job we've asked them to do. To protect your health information, however, we require the business associate to appropriately safeguard your information.

DIRECTORY: Unless you notify us that you object, we may use your name and location within the facility in a daily directory to be provided to other people who ask for you by name.

NOTIFICATION: We may use or disclose information to notify a family member, personal representative, or another person responsible for your care, your location and general condition.

COMMUNICATION WITH FAMILY: Health professionals, using their best judgment, may disclose to a family member, other relative, close personal friend or any other person you identify, health information relevant to that persons involvement in your care or payment related to your care.

RESEARCH: We may disclose information from your records that has been to researchers when their research has been approved by the OSU Institutional Review Board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.

FOOD AND DRUG ADMINISTRATION (FDA): We may disclose to the FDA health information relative to adverse events with respect product and product defects, or post marketing surveillance information to enable product recalls, repairs, or replacement.

WORKERS COMPENSATION: We may disclose health information to the extent authorize by and to the extent necessary to comply with laws relating to workers compensation or other similar programs established by law.

PUBLIC HEALTH: As required by law, we may disclose your health information to public health or legal authorities charged with preventing or controlling diseases, injury, or disability.

LAW ENFORCEMENT: We may disclose health information for law purposes as required by law or in response to a valid subpoena.

Federal law makes provision for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a work force member or business associate believes in good faith that we have engaged in unlawful conduct or have otherwise violated professional or clinical standards and are potentially endangering one or more patients, workers or the public.

CODE OF CONDUCT

We, the undersigned, agree that _____ (applicant's name) will obey the rules of conduct for the OSU Animal Science Livestock Judging Camp set forth below:

- 1. Attend and be on time at all events and activities.**
- 2. Observe hours set for being in rooms at night.**
- 3. Avoid abuse of room furnishing. Participants will pay for damages done.**
- 4. Boys and girls will be housed on separate floors. No boys will be allowed on the girls' floor or in a girl's room nor will girls be allowed on the boys' floor or in a boy's room as individuals or groups.**
- 5. Participants will remain in their assigned groups throughout the events and activities of the camp — youth are not to leave campus or training sites at any time.**
- 6. Participants are to wear name tags at all times.**
- 7. Observe rules of good manners and proper grooming (manner of dress, make-up, hairdo, haircut, cleanliness, etc.)**
- 8. Participant possession or use of alcoholic beverages and/or illegal drugs is prohibited. Violation of this regulation will result in the delegates being sent home at their expense.**
- 9. Oklahoma State University Policy prohibits the use of tobacco in any public place on campus.**

Conduct not in keeping with the high standards of 4-H and FFA work and Oklahoma State University will not be tolerated. Flagrant violation of points listed above will result in the member being sent home at the camper's own expense.

We understand the reason for this agreement is to ensure conduct and behavior that will result in every participant receiving the full benefit and enjoyment of the education experience at the OSU Animal Science Livestock Judging Camp, and it is not intended to place undue restriction upon them.

Applicant Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

TENTATIVE SCHEDULE *SESSION I*

MONDAY, JUNE 11

8:00-9:15 a.m.	Check-In & Room Assignments, <i>Village Suites Dormitory (NE Entrance)</i>
9:30-10:45 a.m.	Welcome, Introductions & Objectives, <i>ANSI 123</i>
11:00 a.m.	Carcass Evaluation, <i>FAPC</i>
11:30-12:00 p.m.	Lunch, <i>ANSI Hallway</i>
12:00 p.m.	Load Bus, <i>West FAPC/Animal Science Parking Lot</i>
12:30-2:30 p.m.	Judging Market Steers, Market Lambs & Breeding Ewes, <i>ANSI Arena</i>
2:30 p.m.	Load Bus, <i>ANSI Arena</i>
3:00 p.m.	Oral Reasons, <i>ANSI Building</i>
5:15-7:00 p.m.	Dinner, <i>FAPC Atrium</i>
7:15-10:30 p.m.	Oral Reasons, <i>ANSI Building</i>

TUESDAY, JUNE 12

7:00-8:00 a.m.	Breakfast, <i>Village Suites Courtyard</i>
8:00 a.m.	Load Bus, <i>Village Suites (East of Basketball/Volleyball Courts)</i>
8:15 a.m.	Judging Market Hogs & Breeding Gilts, <i>OSU Swine Teaching Center</i>
11:45-12:30 p.m.	Lunch, <i>ANSI Arena</i>
12:30 p.m.	Load Bus & Transport to Purebred Beef Center-Judging Breeding Cattle, <i>ANSI Arena</i>
3:00 p.m.	Load Bus, <i>Purebred Beef Center</i>
3:15 p.m.	Oral Reasons, <i>ANSI Building</i>
5:15-7:15 p.m.	Dinner, <i>FAPC Atrium</i>
7:30-10:30 p.m.	Oral Reasons, <i>ANSI Building</i>

WEDNESDAY, JUNE 13

7:00 a.m.	Load Bus, <i>Village Suites (East of Basketball/Volleyball Courts)</i>
7:10-8:00 a.m.	OSU Dean's Breakfast, <i>O-Club at Gallagher-Iba Arena/Boone Pickens Stadium</i>
8:00 a.m.	Tour of Gallagher-Iba Arena/Boone Pickens Stadium
9:00 a.m.	Load Bus, <i>Gallagher-Iba Arena (North Parking Lot)</i>
9:15-11:00 a.m.	Use of Performance Records in Judging Contests, <i>Purebred Beef Center</i>
11:00 a.m.	Load Bus, <i>ANSI Arena</i>
11:30-12:15 p.m.	Lunch, <i>ANSI Building</i>
12:30 p.m.	Oral Reasons & Wrap-Up, <i>ANSI Building</i>
3:00 p.m.	Awards, <i>ANSI 123</i>
3:30 p.m.	Checkout, <i>Village Suites</i>

TENTATIVE SCHEDULE *SESSION II*

THURSDAY, JUNE 14

8:00-9:15 a.m.	Check-In & Room Assignments, <i>Village Suites Dormitory (NE Entrance)</i>
9:30-10:45 a.m.	Welcome, Introductions & Objectives, <i>ANSI 123</i>
11:00 a.m.	Carcass Evaluation, <i>FAPC</i>
11:30-12:00 p.m.	Lunch, <i>ANSI Hallway</i>
12:00 p.m.	Load Bus, West FAPC/Animal Science Parking Lot
12:30-2:30 p.m.	Judging Breeding Cattle, <i>Purebred Beef Center</i>
2:30 p.m.	Load Bus, <i>Purebred Beef Center</i>
3:00 p.m.	Oral Reasons, <i>ANSI Building</i>
5:15-7:00 p.m.	Dinner, <i>FAPC Atrium</i>
7:15-10:30 p.m.	Oral Reasons, <i>ANSI Building</i>

FRIDAY, JUNE 15

7:00 a.m.	Load Bus, <i>Village Suites (East of Basketball/Volleyball Courts)</i>
7:10-8:00 a.m.	OSU Dean's Breakfast, <i>O-Club at Gallagher-Iba Arena/Boone Pickens Stadium</i>
8:00 a.m.	Tour of Gallagher-Iba Arena/Boone Pickens Stadium
9:00 a.m.	Load Bus, <i>Gallagher-Iba Arena (North Parking Lot)</i>
9:15 a.m.	Judging Market Hogs & Breeding Gilts, <i>ANSI Arena</i>
11:45-12:30 p.m.	Lunch, <i>ANSI Arena</i>
12:30 p.m.	Judging Market Steers, Market Lambs & Breeding Ewes, <i>ANSI Arena</i>
3:00 p.m.	Load Bus, <i>ANSI Arena</i>
3:15 p.m.	Oral Reasons, <i>ANSI Building</i>
5:15-7:15 p.m.	Dinner, <i>FAPC Atrium</i>
7:30-10:30 p.m.	Oral Reasons, <i>ANSI Building</i>

SATURDAY, JUNE 16

8:00-9:00 a.m.	Breakfast, <i>Village Suites Courtyard</i>
9:00 a.m.	Load Bus, <i>Village Suites (East of Basketball/Volleyball Courts)</i>
9:15-11:30 a.m.	Use of Performance Records in Judging Contests, <i>Purebred Beef Center</i>
11:00 a.m.	Load Bus, <i>ANSI Arena</i>
11:30-12:15 p.m.	Lunch, <i>ANSI Building</i>
12:30 p.m.	Oral Reasons & Wrap-Up, <i>ANSI Building</i>
3:00 p.m.	Awards, <i>ANSI 123</i>
3:30 p.m.	Checkout, <i>Village Suites</i>