4-H ADULT ENROLLMENT FORM
Year October 1 thru September 30, 2018
Adults must re-enroll every year

CLUB NAME OR INDIVIDUAL: ____________________________  Date Enrolled: ___/___/___

PART 1: PERSONAL INFORMATION
Name: ____________________________________________________________
(First) (Middle) (Last)
Birth Date: ___/___/___  Years as a Volunteer: __________

Home Phone: (___) ___ - ______  Cell: (___) ___ - ______  Work: (___) ___ - ______

Email: ____________________________  ____ New Enrollment  ____ Re-Enroll

Address: ______________________________________________________
(Street) (City/Town) (State) (Zip)

Program Area(s): ________________________________________________

Ethnicity:  ____ Hispanic  ____ Non-Hispanic  Gender:  Male  Female
(circle one)
Race:  ____ White/Caucassian  ____ Black or African American  ____ Asian
____ American Native/Alaskan Native  ____ Native Hawaiian or Other Pacific Islander

Residence:  ____ Rural/Town: under 10K  ____ Town: 10k-50K  ____ Farm
____ Suburb: over 50K  ____ City: over 50K

Does the enrollee have anyone in the family actively serving in the military?  Yes  OR  No
Self, spouse, child, sibling or parent? Please circle one if actively serving.

Volunteering Data
General Organizational Roles: Please check those that you are currently involved in.
Please indicate with an X if you are interested in.
___ Board of Directors  ___ 4-H Club Leader
___ Program Issues Committee  ___ Project Key Leader
___ Office Work  ___ Other ____________________________

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Cornell Cooperative Extension of Niagara County is an employer and educator recognized for valuing AA/EEO, Protected Veterans, and Individuals with Disabilities and provides equal program and employment opportunities. Please contact our office if you have any special needs.
PART 2: ACKNOWLEDGEMENT OF RISK

I fully understand and acknowledge that there are inherent risks and dangers in my participation in the above activities and my participation in said activities and use of any equipment or materials related to such activities may result in my injury, illness or death and damage to or loss of my personal property. I understand other participants, accidents, forces of nature or other causes may cause these risk and dangers and I hereby fully acknowledge and accept these risk and dangers.

I am in good health and I am at or above the minimum age of 18 required to participate in this activity and I am able to participate in any strenuous physical activity associated therewith.

I herewith release, forever discharge and waive any right of recovery or subrogation against Cornell Cooperative Extension, its officers, directors, employees and volunteers from any and all liability whatsoever for any illness or injury, including death or damage to or loss of my personal property that I may sustain while I am participating in this program. This shall be binding on my heirs, successors, assigns, administrators and executors. Any claims or disputes arising out of my participation in the activity shall first be submitted to arbitration and/or be venued in the Supreme Court of the State of New York of the sponsoring County Association, the choice of which shall be at the sole discretion of CCE.

PART 3: ADULT CODE OF CONDUCT

Cornell Cooperative Extension Niagara County (CCENC) Volunteer/Parents/Guardians (of youth involved with CCENC programs) are expected to accept and adhere to the following standards of behavior when their child(ren) is/are engaged in CCENC Youth Development Program activities as stated here.

As a CCENC Volunteer, Parent or Guardian I will:

- Respect and adhere to CCENC rules, policies and guidelines that relate to specific CCENC Youth Programs. Conduct myself in an ethical manner.
- Model kindness and compassion for others. Recognize that all young people have skills and talents that can be used to help others and improve the community.
- Teach and model fair-mindedness by being open to ideas, suggestions and opinions of others. This includes the final opinions of judges/evaluators for all Youth Programs.
- Fulfill my parental/guardian duties, including completion of required records or reports, in a timely manner.
- Work cooperatively with CCENC Extension staff and volunteers.
- Avoid and prevent put-downs, insults, name-calling, yelling and other verbal and non-verbal conduct as well as written items (including social networking, Internet, etc.) likely to offend, hurt or set a bad example.
- Be responsible for my behavior, exhibit good sportsmanship, use appropriate language and uphold exemplary standards of conduct at all CCENC youth activities
- Respect and uphold the rights and dignity of all staff, other volunteers, and all individuals who participate in CCENC programs recognizing that people’s values, beliefs, customs, and strengths differ.
- Respect individuals of diverse backgrounds, cultures, and perspectives.
- Not possess, sell, offer, consume or use alcohol and/or controlled substances at CCENC youth events/activities, or attend CCENC youth activities under the influence of alcohol and/or controlled substances.
- Model the importance of obeying the laws and rules as an obligation of citizenship and commit no illegal or abusive act.
- Provide a safe environment, not carelessly or intentionally harming youth or adults in any way: verbally, mentally, or physically.
PART 4: Cornell Cooperative Extension Association Volunteer Agreement

We are pleased that you have accepted a volunteer assignment to Cornell Cooperative Extension Association of Niagara County (hereinafter referred to as “CCE”). Please accept our sincere thanks for your valuable contribution to Cornell Cooperative Extension.

1. I, ______________________ agree that as a CCE volunteer my participation in the activities outlined in the attached volunteer position description is without monetary or other compensation. That document, including the Code of Conduct it contains, shall be considered a part of this agreement.

2. I understand that CCE shall have the right to suspend or release me as a volunteer at any time and for any reason, within the discretion of CCE. I also understand that I have the right to terminate this agreement, recognizing that if I receive significant training for the volunteer position that there is an expectation of volunteer service.

3. I understand that CCE does not provide volunteers with medical insurance; therefore CCE is not responsible for any medical expenses incurred by me. Further, I understand that I am neither covered by Worker’s Compensation nor entitled to employee benefits as a result of my CCE volunteer affiliation.

4. CCE will cover me as a volunteer under the CCE commercial general liability to protect me against any covered claims for injury to persons or damage to property arising out of my activities as a volunteer. In exchange for volunteer liability insurance protection I, on behalf of myself, my heirs and my representatives, do hereby release Cornell Cooperative Extension and the Association, its officers, directors, employees, and other volunteers from any liability whatsoever for any injury to myself, including death, or damage to my property that arises out of or is in any way related to my volunteer activities unless my injury is the result of the sole negligence of Cornell Cooperative Extension or the Association. I understand that the liability insurance coverage only applies when I am on duty, acting in accordance with CCE guidelines for my volunteer assignment, and all other applicable pre-conditions for coverage under the CCE insurance policy are met.

5. CCE agrees to provide the orientation, training, supervision, and support deemed necessary by CCE for the successful fulfillment of my volunteer responsibilities.

6. I am aware of the terms and conditions of this agreement and agree that the provisions of this agreement do not constitute a contract, either expressed or implied, for employment between CCE and myself.

7. Background checks will be repeated on a regular basis; every year for the NYS Sex Offender Registry, every 3 years for the Criminal History File check or MVR check. The Volunteer Agreement and Code of Conduct will be reviewed every year.

8. I fully support the following statement. "Cornell Cooperative Extension in Niagara County provides equal program and employment opportunities."

9. This agreement is valid until it is terminated by CCE or by me.

PART 5: PHOTO RELEASE

By signing this form, I consent and give permission to allow Cornell Cooperative Extension the unlimited right to use photos, videos, direct quotes, and/or audio clips that they have of me participating in Cornell Cooperative Extension programs or events. I agree to give up my rights with regards to Cornell Cooperative Extension photos, videos, direct quotes, and/or audio clips of me. Further, by signing this consent and release form, I acknowledge that I understand and agree to the above request and conditions. I sign this form freely and without inducement.

Please Circle:        Yes      OR       No        Please initial:  ____

PART 6: SIGNATURES

With my signature, which I voluntarily affix to this document, I acknowledge that the information is accurate to the best of my knowledge, and I have read and understand the terms of all releases, acknowledgements and agreements herein, specifically including parts: #1 Personal Information, #2 Acknowledgement of Risk, #3 Code of Conducts, #4 Volunteer Agreement, #5 Photo Release, #6 Signatures.

Volunteer Name Print: ____________________________       Date: _____________________

Volunteer Signature: _______________________________    Date: _____________________
Questions or Concerns

Cathy Maloney  Executive Director/ Fair Director

Heidi Feltz  4-H Resource Educator, 433-8839 ext. 241, hmk3@cornell.edu
4-H Youth Development Leader, Animal Science, General 4-H questions, Shooting Sports

Kathy Bowers  4-H/Youth Development Community Educator, 433-8839 ext. 239, krc8@cornell.edu
Ambassadors, Clover Scene, Community Teen Programs, General 4-H questions, Shooting Sports

Bonnie Benton  4-H/Youth Development Community Educator, 433-8839 ext. 240, blb14@cornell.edu
Enrollments (Member & Volunteer), 4-H After School Programs, Jr. Gardeners, Shooting Sports

Karen Krysa  Room Reservations, 433-8839 ext. 221, kmk27@cornell.edu

Michelle Matyjas  Accounts Manager, 433-8839 ext. 235, mlm436@cornell.edu