



Member Information:

Last Name		First Name	
Preferred Name		Date of Birth (Youth Only)	
Email		Primary Phone	
Cell Phone		Work Phone	
Emergency Contact Name		Emergency Contact #	
Mailing Address		Mailing Address 2	
City		County (of residence)	
State		Zip	
Township		M.I	
Receive Email Newsletters	<input type="checkbox"/> Yes <input type="checkbox"/> No	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Gender Identity not listed <input type="checkbox"/> Prefer not to respond

"I consent to receiving texts from CCE" My Cell Carrier is: _____ My cell phone number is: _____

Parent/Guardian 1 Information:

FOR OFFICE USE ONLY: Family ID: _____

Last Name		First Name	
M.I		Preferred Name	
Mobile Phone		Work Phone	
Mailing Address 1		Mailing Address 2	
City		County (of residence)	
State		Zip	
Occupation		Email	
Legal Guardian	<input type="checkbox"/> Yes <input type="checkbox"/> No	Receive Email Newsletters	<input type="checkbox"/> Yes <input type="checkbox"/> No

"I consent to receiving texts from CCE" My Cell Carrier is: _____ My cell phone number is: _____

Parent/Guardian 2 Information:

FOR OFFICE USE ONLY: Family ID: _____

Last Name		First Name	
M.I		Preferred Name	
Mobile Phone		Work Phone	
Mailing Address 1		Mailing Address 2	
City		County (of residence)	
State		Zip	
Occupation		Email	
Legal Guardian	<input type="checkbox"/> Yes <input type="checkbox"/> No	Receive Email Newsletters	<input type="checkbox"/> Yes <input type="checkbox"/> No

“I consent to receiving texts from CCE” My Cell Carrier is: _____ My cell phone number is: _____

ES 237 Demographics:

Ethnicity	Are you of Hispanic ethnicity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Race	<input type="checkbox"/> White	<input type="checkbox"/> Native Hawaiian or Pacific Islander
	<input type="checkbox"/> Black	<input type="checkbox"/> Asian
	<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Prefer Not to State



NYS 4-H Member Enrollment Form

Residence	<input type="checkbox"/> Farm <input type="checkbox"/> Town under 10,000 & rural non-farm <input type="checkbox"/> Town /City 10,000-50,000 & suburbs	<input type="checkbox"/> Suburb of city more than 50,000 <input type="checkbox"/> Central city more than 50,000
Military	<input type="checkbox"/> No one in my family is serving in the military <input type="checkbox"/> I have a sibling serving in the military	<input type="checkbox"/> I have a parent serving in the military
Branch Component	<input type="checkbox"/> Air force <input type="checkbox"/> Army <input type="checkbox"/> Coast Guard <input type="checkbox"/> Marines <input type="checkbox"/> Navy <input type="checkbox"/> Active Duty <input type="checkbox"/> National Guard <input type="checkbox"/> Reserves	
Grade	_____ School Name _____	
School Type	<input type="checkbox"/> Public School	<input type="checkbox"/> Homeschool/Alternative

(Youth Only)

- Private School
- Special Education

- Magnet/ Specialized School
- Charter School

Enrollment Information:

Status	<input type="checkbox"/> New <input type="checkbox"/> Returning/ Re-Enrollment
Enrollment Category	<input type="checkbox"/> Member <input type="checkbox"/> Cloverbud Club: _____ Date Enrolled: _____ 4-H age: _____ Years In 4-H: _____
Enrollment Fee (if applicable)	Paid : <input type="checkbox"/> Yes <input type="checkbox"/> No Payment method: <input type="checkbox"/> Cash <input type="checkbox"/> Check Check #: _____
Is this individual a Youth Volunteer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Youth member a club officer?	<input type="checkbox"/> Yes <input type="checkbox"/> No Club Officer position: _____
Forms Submitted	<input type="checkbox"/> Photo Release <input type="checkbox"/> Acknowledgement of Risk <input type="checkbox"/> Code of Conduct From

Educational Focus:

Clubs	<input type="checkbox"/> Enroll (New Club): _____ (New Club): _____ (New Club): _____ (New Club): _____
Projects	<input type="checkbox"/> Enroll (New Project): _____ (New Project): _____ (New Project): _____ (New Project): _____ (New Project): _____ (New Project): _____ (New Project): _____ (New Project): _____
Activities	
Certifications	

Part #2: Acknowledgment of Risk Form – 4-H Member/Equine Member

This form must be completed to participate in 4-H Equine clubs and related activities.

This form may be completed during 4-H enrollment for the full program year for 4-H equine activities and events designated below at the club, county, multiple county, regional, state and national level.

I hereby apply for my child to participate in the 4-H club and/or activity indicated below to be conducted by the designated Cornell Cooperative Extension Association and acknowledge as follows:

I fully understand and acknowledge that there are inherent risks and dangers in my child's participation in the 4-H club and activities and my child's participation in said 4-H club and all its activities and use of any equipment related to such activities may result in injury, illness or death and damage to personal property. I understand other participants, accidents, forces of nature or other causes may cause these risks and dangers and I hereby accept these risks and dangers.

My child is in good health and is at or above the minimum age of eight (8) for regular 4-H Equine club members required to participate in this activity and is able to participate in any strenuous physical activity associated therewith.

Cornell Cooperative Extension of _____ County

DATE(S): 4-H Program Year: October 1, 20__ - September 30, 20__

4-H CLUB EQUINE ACTIVITY:

- Participating in an equine club
- Working with equines beyond club level including clinics, camps, shows
- Working with equines in mounted "over fences" activities. *I (the parent or legal guardian) am aware that my child will be participating in 4-H Horse Program mounted "over fences" activities at Cornell University Cooperative Extension county, multiple county, regional, or state sponsored events. I give my child permission to participate. Mounted "over fences" classes in the NYS 4-H Horse Program could include ground rail, cross rail, and/or other over fences classes and obstacles (this does include trail class). The obstacles will be no higher than three (3) foot in any of the 4-H activities.*
- All of the above

Part #3: Photo Release

By signing part #5, 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 Check: Yes OR No





Part #4: NYS 4-H Code of Conduct

Our first priority is to create a safe, inclusive space for learning, sharing, and collaboration welcoming to people from diverse backgrounds, cultures and perspectives. Diversity includes, but is not limited to: race, color, religion, political beliefs, national or ethnic origin, immigration status, sex, gender, gender identity and expression, transgender status, sexual orientation, age, marital or family status, educational level, learning style, physical appearance, body size, protected veterans, and individuals with disabilities. CCE actively supports equal educational and employment opportunities. No person shall be denied admission to any educational program or activity on the basis of any legally prohibited discrimination. CCE is committed to the maintenance of affirmative action programs that will assure the continuation of such equality of opportunity.

All 4-H Participants—youth, families, volunteers, and Extension staff—in or attending any activity or event sponsored by Cornell University’s Cornell Cooperative Extension (CCE) 4-H Youth Development Program are required to uphold the values of the NYS 4-H program and conduct themselves according to these standards. The standards also apply to online activity, including social media internet presence.

Ground Rules

The following Ground Rules apply to all 4-H participants and volunteers. In addition to these expectations, CCE volunteers are accountable to additional expectations outlined in the CCE Volunteer Code of Conduct. Extension staff is accountable to additional standards of professionalism that are outlined by position descriptions and CCE human resource policies.

1. **Create a Welcoming Environment for All.** Encourage everyone to fully participate in CCE and 4-H. Recognize that all people have skills and talents that can help others and improve the community. Though we will not always agree, we must disagree respectfully. When we disagree, try to understand why.
2. **Bring Your Best Self.** Respect and follow Cooperative Extension rules, policies, and guidelines that relate to 4-H Youth Programs and Events. Conduct yourself in a manner that reflects honesty, integrity, self-control, and self-direction. Accept the results and outcomes of 4-H contests with grace and empathy for other participants. Accept the final opinions of judges and evaluators. Be open to new ideas, suggestions, and opinions of others
3. **Obey the Law.** Commit no illegal acts. Do not possess or use illegal drugs, tobacco products, firearms, weapons, or any harmful object with the intent to hurt others at any time. (Firearms are allowed only as part of supervised 4-H Shooting Sports programming.) Do not attend CCE or 4-H activities under the influence of alcohol or controlled substances.
4. **Honor Diversity – Yours and Others’.** Respect and uphold the rights and dignity of all staff, volunteers, families, and youth who participate in CCE and 4-H programs. Follow [Cornell Cooperative Extension Non-Discrimination Policy](#).
5. **Create a Safe Environment.** Do not carelessly or intentionally harm youth or adults in any way (verbally, mentally, physically, or emotionally). Refrain from romantic displays and sexual activities either in public or private situations. Be kind and compassionate towards others. Do not insult or put down other participants. Harassment, bullying, and other exclusionary behavior aren't acceptable. Be considerate and courteous of all youth and adults and their property.
 - a. Youth must stay in the designated dormitory lodging areas: boys may not be in girls’ dormitory or lodging areas and girls may not be in boys’ dormitory or lodging areas.



- b. Report any and all accidents, physical or verbal abuse or unsafe conditions that threaten the emotional or physical well-being of others or yourself to the NYS 4-H, Extension staff, and Event Coordinators as soon as possible.
- 6. **Be a Team Player.** Work cooperatively with Extension staff, volunteers, 4-Hers, and all involved in 4-H programs and activities. Be responsive to the reasonable requests of the person in charge. Respect the integrity of the group and the group's decisions.
- 7. **Participate Fully.** Participate in all of the planned programs, be on time and follow through on assigned tasks/responsibilities (including the completion of required records or reports) in a manner that insures the safety, well-being, and quality of the educational experience for self and others. Have fun!
- 8. **Watch What You Wear.** Use your best judgment. Wear clothing suited for the activity you will participate in. Clothing promoting alcohol and other intoxicants, or displaying messages that are racist, sexist, homophobic, or any other degrading message that detrimentally impacts the dignity and respect of members of our community are never acceptable. Don't wear revealing clothing, such as short skirts or shorts, midriff-baring tops, and sagging pants. If you are unsure about what is appropriate, contact the local CCE 4-H Educator in charge in advance.
- 9. **Be a Positive Role Model.** Act in a mature, responsible manner, recognizing you are role models for others, and that you are representing yourself, CCE, and the 4-H Youth Development Program. Be responsible for your behavior, use positive and affirming language, and uphold exemplary standards of conduct at all 4-H activities.

Consequences

Any of the following may be used, depending on severity of the situation:

- 1. Participant will receive a verbal warning.
- 2. Participant may remain at the event/activity, but may possibly be barred from a future event.
- 3. Participant may be asked to leave the event/activity/program. If a youth, the parent(s) will be called and the youth will be sent home at family's expense.
- 4. Additional consequences including suspension or termination of membership may be considered at the County level to ensure the health, safety and well being for all participants.

Part #5: Signatures

With my signature, which I voluntarily affix to this document, I acknowledge that this information is accurate to the best of my knowledge, and I have read and understand the terms of all acknowledgments and agreements herein, specifically including parts #1 Member enrollment information, #2 Acknowledgment of Risk, #3 Photo Release, and #4 Code of Conduct.

PARTICIPANT'S NAME (print): _____

DATE OF BIRTH: _____

ADDRESS: _____

PARENT GUARDIAN NAME (print): _____

SIGNATURE: _____ **DATE:** _____

YOUTH SIGNATURE: _____

New York State 4-H Permission Slip

Information in this form will be used to help ensure a safe, positive experience for you and/or your child. Only Cornell Cooperative Extension and 4-H staff (including the event coordinator and medical director) will be able to view this form and information will only be used as needed.

Activity Date(s) and Location: NYS 4-H virtual and in-person Events for the 2022 4-H Year (October 1, 2022 – September 30, 2023) at Cornell University (including bowling, gym, and pool activities), NYS Fairgrounds, and other locations

Activity Director: CCE 4-H staff

Participant Information (please print):

Participant's Name: _____

Date of Birth: _____

Check one: Youth Adult Volunteer CCE staff

If youth: Parent/Guardian Name: _____ Parent/Guardian Phone: _____

Address (city, state, and zip code): _____

Home Phone: _____

Cell Phone: _____

Emergency Contact Name: _____

Phone: _____

Medical Release

Family Medical and Hospitalization Coverage

Type of Insurance Coverage: _____

Subscriber of Policy: _____

Address of Insurance Company: _____

Identification/Policy #: _____

Family Physician's Name: _____

Phone: _____

Medical History – please check all that apply

Medical Conditions

- Ear Infections
- Rheumatic Fever
- Convulsions
- Diabetes
- Asthma
- Other (specify): _____

Allergies

- Hay Fever
- Insect Stings
- Ivy Poisonings
- Penicillin
- Other (specify): _____

Food Allergies/Dietary Restrictions

- Peanuts
- Milk
- Eggs
- Tree Nuts
- Seafood/Shellfish
- Gluten Products
- Other (specify): _____

Date of Last Tetanus Booster: _____

Current Prescribed Medication (specify): _____

The nurse/medical director will inventory and collect all medications (with the exception of epi pens and inhalers) at registration, and keep them locked at the nurse's office. As needed, participants will request their medication from the nurse for self-administration. Any need for assistance (e.g., injection) will be referred to Gannett Health Center or closest medical facility.

Please specify any other health concerns, physical activity restrictions, and/or any other information you want 4-H staff and chaperones to be aware of on behalf of your child's welfare.

Participant Full Name (please print): _____

County: _____

Parent/Guardians

- I understand that I will be notified in case of serious injury or illness. However, in the event that I cannot be reached, I hereby give permission for my child named above to be medically treated by a physician or medical facility as appropriate.
- I hereby give permission for the nurse/medical director to inventory, collect, keep all medications and supervise my child's self-administration for the duration of the event, as described above.

Initials: _____

Adult Participants

I give my permission to be medically treated by a physician or medical facility as appropriate, in the event of an emergency or illness.

Initials: _____

Communication Strategies

CCE Staff or volunteers may use a variety of communication methods (for example: email, text messaging, and/or messaging through social media or apps) to support programming. For example, they may need to connect with a youth person at State Fair at curfew time or get together for a county photo at Career Explorations.

Parent Guardians - Check if you DO consent:

- Communications directly to your child
- Communications with parent/guardian cc-ed on message

Initials: _____

Initials: _____

Adults - Check if you DO consent:

- Communications directly to yourself

Initials: _____

What is your preferred communication method(s)?

Photo Release

Cornell University is granted permission to use and/or publish my or my child's photograph or image (including: audio, film, digital image, virtual programming, or any other media) for educational purposes on their respective websites or for the promotion of their respective programs. I understand that I/my child/ward are not being compensated in any way for the use of our images and that I/we do not have approval over the final product in which it appears. I hereby release Cornell Cooperative Extension, Cornell University, and all persons acting under their permission or authority from any and all claims or liability arising out of use of our images. This release shall bind our heirs, guardians, assigns, and legal representatives.

- Check here if you DO consent.

Initials: _____

Program Evaluation Consent.

Through participation in Cornell Cooperative Extension and 4-H programs, you or your child may be asked to complete a survey about their experiences in the program or activity. The New York State 4-H State Office at Cornell University regularly uses data collected from these surveys for evaluation efforts designed to inform our programming and to provide better, more meaningful educational experiences in the future. Participation in the survey is anonymous, voluntary, and there is no impact on program participation if someone refuses to complete a survey. A participant, parent, or guardian may withdraw consent at any time and a participant may refuse any survey request at any time.

- Check here if you DO consent.

Initials: _____

COVID- 19 Assumption of Risk, Waiver, and Release of Liability

I understand and acknowledge that COVID-19 is a global pandemic and a public health risk. I understand that the risk of becoming exposed to or infected by COVID-19 at Cornell University may arise from the actions, omissions, or negligence of myself, my child and/or others. I recognize that the University cannot limit all potential sources of COVID-19 infection. I knowingly and voluntarily assume all risks, including but not limited to, the risk of illness, death, bodily injury, disability, or exposure or infection with COVID-19, for myself, my child, and my family. I fully understand the risks, I knowingly and voluntarily waive and release Cornell University trustees, officers, agents, volunteers, employees, and students (the "Released Parties") from all present and future claims of any type, including negligence, for any harm or loss, including but not limited to, economic loss, personal injury, disease, death or property damage suffered by me, my child, or my family, as a result of my child's participation in a Cornell University program, camp, or activity or as a result of my child's presence or my presence on Cornell University's campus (the "Activities"). I agree to indemnify, hold harmless, and covenant not to sue the Released Parties for any personal injury, death, medical expenses, disability, loss of capacity, property damage, court costs, attorney's fees, or other loss arising out of the Activities.

Monitoring and Supervision of Minor during Virtual Learning

I promise to provide a suitable non-public place, like my home, for my child to participate in the Program sessions and understand that Cornell University encourages parents to have someone over eighteen (18) years of age present or nearby my child during all Program sessions and for the entirety of each session. I further understand and acknowledge that, based on the fact that the Program sessions are occurring via web-conference or other online platform, neither Cornell University nor their faculty, staff, students, and volunteers are responsible for monitoring or supervising my child during the Program sessions.

Permissions Granted

I hereby consent or give my child permission to fully participate (subject to the restrictions noted) in the Cornell Cooperative Extension activity on the date(s) and at the location(s) indicated above.

Parent/Guardian or Adult Participant Signature: _____ Date: _____

Project List-

Please place a check mark next to all the project areas you may be interested in.

-
-
-
-
- Aerospace
- Ag in the Classroom
- Adventure, Challenge
- Agriculture Literacy
- Animal Science
- Animals
- Aquaculture
- Aquatic Science
- Arts and Crafts
- Astronomy
- ATV Safety
- Automotive
- Automotive Safety
- Beef Cattle
- Bicycle
- Bicycle Safety
- Biological Sciences
- Birds and Poultry
- Career Exploration and Employability
- Cats
- CHANCE: Collaborating for Health, Activity and Nutrition in Children's Environments
- Character Development
- CHAT: Choose Health Action Teens - Leader
- CHAT: Choose Health Action Teens - Student
- Chemical Health
- Chemistry
- CHFFF: Choose Health Food, Fun and Fitness
- Child Development, Child Care, Babysitting
- Citizen Science
- Citizenship
- Citizenship and Civic Education
- Civic Engagement
- Civic Engagement
- Civic Making
- Clowning, Mime
- Communication Arts
- Communications and Expressive Arts

- _____ Communities for Child Safety
- _____ Community / Volunteer Service
- _____ Community Service
- _____ Community Youth Development
- _____ Composting
- _____ Computer Technology
- _____ Consumer and Family Science
- _____ Consumer Education
- _____ Critical Thinking Skills
- _____ Crops and Weeds
- _____ Crops, Weeds
- _____ Culinary Skills/Food Preparation
- _____ Cultural Education
- _____ Dairy Cattle
- _____ Dance, Movement
- _____ Dogs
- _____ Drama, Theater
- _____ Drawing, Painting, Sculpting
- _____ Earth, Water, and Air
- _____ Economics, Business, and Marketing
- _____ EFNEP
- _____ Electric
- _____ Electronict
- _____ Energy
- _____ Engines, Tractors, Field
- _____ Entomology and Bees
- _____ Entrepreneurship
- _____ Environmental Education / Earth Sciences
- _____ Environmental Stewardship
- _____ ESNY: Eat Smart New York
- _____ Exploratory 4-H Projects
- _____ Fiber Science (Clothing and Textiles)
- _____ Fiber Science: Style Engineers
- _____ Fitness and Sports
- _____ Flower Garden and House Plant
- _____ Flower Gardening and House Plants
- _____ Food Preservation
- _____ Food Safety
- _____ Food Science
- _____ Forestry
- _____ Forests and Wildlife
- _____ Gardens- Fruit, Vegetable
- _____ Geology and Minerals
- _____ Global Education
- _____ Goats
- _____ Government Principles
- _____ GPS/GIS
- _____ Graphic Arts, Displays, Exhibits
- _____ Growth, Development, and Disease
- _____ Health
- _____ Heritage, Culture and Global Competency
- _____ History

- _____ Hobbies and Collections
- _____ Home Environment, Home Improvement
- _____ Home Nursing, First Aid, CPR
- _____ Horse, Pony
- _____ Household Hazardous Waste
- _____ Incubation and Embryology
- _____ Intergenerational Programming
- _____ Introductory 4-H Projects
- _____ Invasive Species Action Teams
- _____ Junior Master Gardener
- _____ Leadership and Personal Development
- _____ Leadership Skills Development
- _____ Leisure Education
- _____ Llama and Alpacas
- _____ Marine Science
- _____ Mathematics
- _____ Meat Animal Science
- _____ Mechanical Engineering & Industrial
_____ Arts
- _____ Mental and Emotional Health
- _____ Mindfulness - Social Emotional
_____ Wellness
- _____ Music, Sound
- _____ National 4-H STEM Challenge
- _____ Ornamental Horticulture
- _____ Other Emergency Preparedness
- _____ Other Fitness/Sports/Outdoor Activity
- _____ Other Fitness/Sports/Outdoor Activity
- _____ Other Nutrition Activity
- _____ Other Nutrition Activity
- _____ Other Nutrition Activity
- _____ Other Risk and Thriving in Adolescence
- _____ Outdoor Education
- _____ Parenting and Family Life Education
- _____ Pathways to Science through Nature
- _____ Performing Arts
- _____ Personal Development
- _____ Personal Roles and Responsibilities
- _____ Personal Safety
- _____ Photography, Video
- _____ Physical Health
- _____ Physical Sciences
- _____ Physics
- _____ Plant Science
- _____ Plants
- _____ Poultry
- _____ Problem Solving Skills
- _____ Project Nest Watch
- _____ Public Presentations/Speaking/Radio/
_____ TV
- _____ Rabbits, Cavies
- _____ Radio, Tv
- _____ Range Science
- _____ Reading Literacy
- _____ Reading Literacy

- ___ Recycling
- ___ Robotics
- ___ Science and Technology Literacy
- ___ Science Sampler Day at Cornell
- ___ Series
- ___ Service Learning
- ___ Sexual Health
- ___ Sheep
- ___ Shooting Sports
- ___ Shooting Sports Archery
- ___ Shooting Sports BB
- ___ Shooting Sports Hunter Safety
- ___ Shooting Sports Hunting/Wildlife
- ___ Shooting Sports Muzzleloader
- ___ Shooting Sports Pistol
- ___ Shooting Sports Rifle
- ___ Shooting Sports Rifle
- ___ Shooting Sports Shotgun
- ___ Shooting Sports Volunteer Training
- ___ Small Animals, Pocket Pets, Lab Animals
- ___ SNAP-ED
- ___ Social Recreation Skills
- ___ Soils and Conservation
- ___ Spaces
- ___ State Geospatial Science and Technology Project
- ___ STEM Library Partnership
- ___ Substance Use/Abuse Prevention
- ___ Sustainable and Renewable Energy
- ___ Sustainable Polymers
- ___ Swine
- ___ Technology and Engineering
- ___ Technology and Engineering
- ___ Tractor and Machinery Safety
- ___ Understanding Physical
- ___ Values Clarification, Mutual Respect and Understanding
- ___ Veterinary Science
- ___ Visual Arts
- ___ Volunteerism
- ___ Walmart: Youth Voice Youth Choice (YVYC)Select
- ___ Waste Management
- ___ Water
- ___ Weather and Climate
- ___ Wild Birds
- ___ Wild Edibles
- ___ Wildlife and Fisheries
- ___ Writing, Print