4-H Volunteer/Leader Re-Enrollment Form
Westchester County

Date:_____

First Name:	Last Name
Email address:	Primary Phone Number:
Mailing Address:	
City, State, Zip Code:	
Emergency Contact Information	
First Name:	Last Name;
Mobile Phone:	
Volunteer Type: ☐ Club Leader ☐ Project Leader ☐ Parent Volunteer ☐ Casual Volunteer **Club**: **Project/Activity**:	
Demographics	
Ethnicity	☐ Hispanic ☐ Non-Hispanic
Gender:	☐ Male ☐ Female ☐ Non-Binary
Race	☐White/Caucasian ☐Black or Africa American ☐ Asian ☐ American Native/Alaska Native ☐ Native Hawaiian or other Pacific Islander
Residence	☐White/Caucasian ☐Black or Africa American ☐ Asian ☐ American Native/Alaska Native ☐ Native Hawaiian or other Pacific Islander
Military	☐ No one in my family is serving in the military ☐ I have a spouse in the military ☐ I am serving in the military ☐ I have a son/daughter serving in the military ☐ I have a sibling serving in the military
Branch	☐ Air Force ☐ Army ☐ Coast Guard ☐ DOD Civilian ☐ Marines ☐ Navy ☐ Army ☐ Active Duty ☐ National Guard ☐ Reserves
Do you require accomodations for a disability (yes/no) _____ If yes, describe accomodations needed:	

PHOTO RELEASE

Cornell Cooperative Extension Westchester County (CCE) is granted permission to use and/or publish my or my child's photograph(s) or image (including audio, film, digital image or any other media) for educational purposes, including on its website, in newsletters, publications, marketing materials, etc., for promotion of CCE and CCE programs/services. I also grant CCE the right to distribute, display, broadcast, exhibit, and market said photograph(s), either alone or as part of a finished production, for commercial or non-commercial purposes as CCE or its employees and agents may determine. This includes the right to use said photograph(s) for promotion or publicizing any of these uses.

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 CCE and all persons acting under its 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.

If this release is being signed for a child/ward, I certify that I am the parent/guardian authorized to sign this release.

Please check one:

☐**YES**

☐**NO**

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Please check one:

☐Yes

☐No

ADULT CODE OF CONDUCT

Cornell Cooperative Extension Westchester County (CCEWC)4-H Club Leaders (of youth involved with CCEWC programs) are expected to accept and adhere to the following standards of behavior when working with and guiding children engaged in CCEWC Youth Development Program activities as stated here.

As a CCEWC 4-H Leader I will:

❖ Respect and adhere to CCEWC rules, policies and guidelines that relate to specific CCEWC 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 duties, including completion of required records or reports, in a timely manner.

❖ Work cooperatively with CCEWC 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 CCEWC youth activities

❖ Respect and uphold the rights and dignity of all staff, other volunteers, and all individuals who participate in CCEWC 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 CCEWC youth events/ activities, or attend CCEWC 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. Set an example for a gossip-free environment, speaking respectfully about fellow volunteers, CCE staff, and our participants.

❖ Preserve the confidentiality of information (and sign confidentiality agreement if required by my volunteer role) about program participants and CCE internal affairs that have been entrusted to me as affirmed by my signature on the Volunteer Confidentiality Agreement.

❖ Refrain from using my CCE volunteer status for personal or business financial gain.

❖ Participate in required training programs and use the recommended policies and procedures.

❖ Report all unsafe conditions and accidents to professional Extension staff as soon as possible.

- ❖ Resolve issues with others respectfully, consulting with your CCE staff or CCE Executive Director when needed. Remember to keep all online and social media interactions about CCE or its programs, staff or volunteers positive and professional.
- ❖

ASSUMPTION OF THE RISK AND WAIVER OF LIABILITY RELATING TO CORONAVIRUS/COVID-19

This form must be completed to participate in 4-H clubs and related activities.
This form may be completed during 4-H enrollment for the full program year for 4-H activities and events designated below at the club, county, state and national level.

CORNELL COOPERATIVE EXTENSION - VOLUNTEERS AND PROGRAM PARTICIPANTS

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization**. COVID19 is extremely contagious** and is believed to spread mainly from person-to- person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people of more than # (50 as of 7/7).

ACKNOWLEDGEMENT OF RISK

I understand Cornell Cooperative Extension of Westchester has put in place preventative measures to reduce the spread of COVID-19; however, **CCE cannot guarantee** that I or my dependent will not become infected with COVID-19. Further, **entering the facilities of, or participating in programs of, CCE could increase my risk of contracting COVID-19**.
By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19.

By participating in **CCE** programs and that such exposure or infection may result in personal injury, illness, permanent disability, or death. I understand that the risk of becoming exposed to or infected by COVID-19 diseases may result from the actions, omissions, of myself and others, including, but not limited to, **CCE** employees, volunteers, other participants, visitors or vendors.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I may experience or incur in connection with my entering **CCE** or participation in **CCE** programming ("Claims"). On my behalf, and on behalf heirs and estate, I hereby release, covenant not to sue, discharge, and hold harmless **CCE**, its directors, officers, employees, volunteers, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, or omissions of the **CCE**, its directors, officers, employees, volunteers, agents, and representatives, whether a COVID-19 infection occurs before, during, or after my participation.

And in addition: As a volunteer, program participant or the guardian of a program participant under the age of 18, by signing the attached, I acknowledge that I have reviewed the plan for Cornell Cooperative Extension of Ulster County. I will abide by the guidelines and continued updates as released by NYS Forward and the CDC.

ACKNOWLEDGEMENT OF RISK
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.

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.

☐Photo Release
☐Code of Conduct
☐Assumption of the risk and waiver of liability relating to coronavirus/covid-19
☐Acknowledgement of Risk

SIGNATURE:_____

DATE: _____