Franklin County 4-H Program
Member Enrollment

OFFICE USE ONLY
Date Received: _____/_____/____
Amount Received: $ _____
Cash or Check: #_____

Category: ☐ New Enrollment ☐ Re-Enrollment

Category: ☐ Member (Youth ages 8-19) ☐ Cloverbud (Youth ages 5-7

Personal Information

First Name: _____ Last Name: _____ MI: _____

Preferred Name: _____ Birth Date: _____ Gender: ☐ Male ☐ Female

Email: _____

Home Phone: _____ Cell Phone: _____

Address Line 1: _____

Address Line 2: _____

City: _____ State: _____ Zip: _____

County: _____

Emergency Contact- Name: _____ Phone: _____

Relationship: _____

Parent Information

First Name: _____ Last Name: _____

Email: _____

Home Phone: _____ Cell Phone: _____

Parent 2 *(Please include address information if different from above)*

First Name: _____ Last Name: _____

Email: _____

Home Phone: _____ Cell Phone: _____

Enrollment

Ethnicity Are you of Hispanic ethnicity? ☐ No ☐ Yes (optional – please indicate both an ethnicity and race)

Race
- ☐ White
- ☐ Black
- ☐ American Indian or Alaskan Native
- ☐ Native Hawaiian or Pacific Islander
- ☐ Asian
- ☐ Prefer Not to State

Residence
- ☐ Farm
- ☐ Town under 10,000 and rural
- ☐ Town/City 10,000 – 50,000 and its suburbs
- ☐ Suburb or city more than 50,000
- ☐ Central city more than 50,000

Military
- ☐ No one in my family is serving in the military
- ☐ I have a parent serving in the military
- ☐ I have a sibling serving in the military

Branch ☐ Air Force ☐ Army ☐ Coast Guard ☐ DOD Civilian ☐ Marines ☐ Navy

Component ☐ Active Duty ☐ National Guard ☐ Reserves

School Name _____ **Grade** _____

School Type
- ☐ Public School
- ☐ Private School
- ☐ Special Education
- ☐ Homeschool/Alternative
- ☐ Magnet/Specialized School
- ☐ Charter School

Club Information

PRIMARY Club Name _____

Has leader approved: ☐ Yes ☐ No ☐ Have not contacted them

Club Name #2: _____

Has leader approved: ☐ Yes ☐ No ☐ Have not contacted them

Or Independent Member (circle)

☐ Staying independent
☐ Looking to join a club
My interest is in: _____
☐ Interested in starting a club

4-H Project Enrollments

SELECT ONLY ONE project you intend to work on (for enrollment purposes)…additional projects will be added later.

4-H Members must complete at least one project a year! 4-H Curriculum, Kits and Resources are available. A project is: a planned series of experiences in one topic in which members learn information and develop skills. A project record form needs to be completed by the end of the year.

- ❒ Animal Science
  - ❒ Beef
  - ❒ Dairy
  - ❒ Dog
  - ❒ Goats
  - ❒ Horses
  - ❒ Poultry
  - ❒ Rabbits/ Cavies
  - ❒ Sheep
  - ❒ Swine
- ❒ Citizenship
  - ❒ Cultural Education
  - ❒ History/Government
  - ❒ Community Service
- ❒ Personal Development
  - ❒ Leadership Skills
  - ❒ Reading Literacy
  - ❒ Career Exploration
  - ❒ Public Speaking
- ❒ Communicative & Expressive Arts
  - ❒ Communication/Radio/TV
  - ❒ Writing
  - ❒ Dance
  - ❒ Drama/Theater
  - ❒ Music/Sound
  - ❒ Arts/Crafts
  - ❒ Photography/Video
- ❒ Cloverbuds *(5 to 7 year olds)*
- ❒ Health & Nutrition
  - ❒ Cooking/Nutrition
  - ❒ Fitness/Sports
  - ❒ Outdoor Recreation
  - ❒ Adventure/Challenge
- ❒ Food Safety & Preservation
- ❒ Personal Safety
  - ❒ First Aid
  - ❒ Emergency Preparedness
  - ❒ Bicycle Safety
  - ❒ ATV Safety
  - ❒ Tractor Safety
- ❒ Consumer & Family Science
  - ❒ Child Care/Babysitting
  - ❒ Financial Literacy
  - ❒ Home Envt. /Improvement
- ❒ Biological Science
  - ❒ Entomology/Bees
  - ❒ Aquatic Science
- ❒ Technology & Engineering
  - ❒ Aerospace /Rocketry
  - ❒ Computers
  - ❒ Electricity
  - ❒ Renewable Energy
  - ❒ Geospatial Science/GIS/GPS
  - ❒ Robotics
  - ❒ Wood Science/Woodworking
- ❒ Physical Sciences
  - ❒ Chemistry, Math, Physics
- ❒ Environmental Education
  - ❒ Composting
  - ❒ Conservation
  - ❒ Forestry
  - ❒ Shooting Sports
  - ❒ Recycling
  - ❒ Weather/Climate
  - ❒ Wildlife/Fisheries
- ❒ Plant Science
  - ❒ Container Gardening
  - ❒ Flowers/House Plants
  - ❒ Fruits/Vegetable Gardening
  - ❒ Landscape/Horticulture
  - ❒ Plant Science
- ❒ Other _____

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, acknowledge and agreements including the following parts: Code of Conduct and Photo Release.

Parent/ Guardian Signature: Date:

***** DON'T FORGET TO INCLUDE YOUR ENROLLMENT FEES *****

Cornell Cooperative Extension of Franklin County

Permission Slip and Medical Release Form

Please Print:

Name_____ Date of Birth_____

Address_____

Parent/Guardian_____Phone_____

In case of emergency, contact_____Phone_____

Activity 4-H Events Date(s)_____Location(s) Franklin County

Activity Director Frankin County 4-H Staff

Medical History

Check any and all that apply to your child:

Date of Last Tetanus Booster_____

Illnesses

{ } Ear Infections
{ } Rheumatic Fever
{ } Convulsions
{ } Diabetes
{ } Other (specify) _____

Allergies

{ } Hay Fever
{ } Insect Stings
{ } Ivy Poisonings
{ } Penicillin
{ } Food _____
{ } Other (specify) _____

Current prescribed medication (specify)_____

On a separate sheet of paper, specify any other health concerns, physical activity restrictions, or other information you want the chaperons or director of this activity to be aware of on behalf of your child's welfare. Also indicate if your child requires any special dietary needs.

Family Medical and Hospitalization Coverage

Name of Insurance Company or Government Program_____

Identification/Policy # _____

Family Physician's Name and Phone Number_____

I hereby 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. I permit the use of any photos, slides, films, or sketches of him/her taken during the activity for publicity, advertising, and promotion.

I further grant permission to the director of the activity (or authorized designee) to dispense to my child any prescribed medication he/she is currently taking.

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.

Signature_____Date_____

Parent or Guardian

Acknowledgement of Risk Form – 4-H Member

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.

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 risk and dangers and I hereby accept these risk and dangers.

My child is in good health and is at or above the minimum age of 5 required to participate in this activity and is able to participate in any strenuous physical activity associated therewith.

Cornell Cooperative Extension of Franklin County DATE(S):

4-H Program Year: From this date forward

4-H CLUB ACTIVITY (Select anticipated program participation):

- ☐ All 4-H activities and events for program year
- ☐ Working with animals other than horses
- ☐ Shooting Sports

For Cloverbuds (youth 5-8 years old only):

- ☐ Cloverbud activities
- ☐ Cloverbud working with equine or other animal programs.

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 3 foot in any of the 4-H activities.
- ☐ All of the above

FRANKLIN COUNTY FAIR:

The Franklin County Fair provides many opportunities for youth participation. Due to the complexities of this week long event, the Franklin County 4-H Program wants to inform parents that Franklin County 4-H is not responsible for youth unless they are working for a 4-H Staff. Examples of such activities include being a junior superintendent or being/scheduled for a 4-H duty/assignment. 4-H is only responsible for them during their scheduled work shift/duty/assignment at the fair.

4-H does not recommend or condone youth sleeping overnight in the animal barns and at no time will provide supervision or assume responsibility of youth during night time hours.

I have read the above and by signing it I agree it is my intention to have my child participate in the indicated activity and I understand and accept the risks involved.

This shall be binding on my heirs, successors, assigns, administrators and executors. Any claims or disputes arising out of my child's participation in the activity shall be venued in the Franklin County Courthouse where the County Extension office is located.

I am at least twenty-one (21) years of age and I am the legal parent/guardian authorized to sign this document on behalf of the child named herein.

PARTICIPANT'S NAME (print) _____ DATE OF BIRTH: _____

ADDRESS:_____

PARENT GUARDIAN NAME (print): _____

SIGNATURE:_____DATE: _____

This form must be kept on file until participant reaches age 21. F.O.R.M Code 1501 2018 Edition

Photo and Image Release

Cornell Cooperative Extension of _____Franklin_____ 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.

Name of Child/Ward: (PRINT) _____

Name of Parent/Guardian: (PRINT) _____

Signature: _____ Date: _____

Diversity and Inclusion are a part of Cornell University's heritage. We are a recognized employer and educator valuing AA/EEO, Protected Veterans, and Individuals with Disabilities.

F.O.R.M. Code 1501
2018 Edition

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. If a youth, the parent(s) will be called and the youth will be sent home at family's expense.

I have read and understand the above and will abide by the NYS 4-H Youth Development Code of Conduct.

Signature of 4-H Youth or Adult	**Date**
Signature of Parent/Guardian (if youth)	**Date**
4-H Program Year:	**From this date forward**