



NEW 4-H Member Enrollment Form

Directions: This form is intended for enrollment of youth, ages 5-19, new to 4-H. Please complete all sections and return to CCE Livingston at the address above along with payment (cash or check payable to CCE Livingston)

Fee: \$15 per child or \$40 per family of 3 or more children. Enrollment Scholarships are available. Please call the CCE Office for more information.

Club Name (if applicable): _____ **Date Enrolled:** ____/____/____

PART 1: Demographics

Name (first, middle, last): _____

Birthdate: ____/____/____ **4-H Age** (age of Jan. 1st of current year): ____ **Grade:** ____ **Sex:** M / F

Address: _____

Street _____ City _____ Zip _____
Primary Phone: (____) _____ - _____ **Member's Email** (if applicable): _____

Ethnicity (circle one): Hispanic Not Hispanic **School District:** _____

Race (circle one): White/Caucasian Black or African American Asian
American or Alaskan Native Native Hawaiian or Other Pacific Islander

Residence (circle one): Farm Rural (under 10K) Town (10K-50K)

Is enrollee from a military family? Yes No

If yes, please specify: Branch _____ Status: _____

What Project Areas are you interested in? (Examples: Foods & Nutrition, Arts & Crafts, Gardening, Horse, Dog, Rabbits, etc.) _____

OFFICE USE ONLY

Received in CCE Office _____ by _____

Amount Received _____ Check # _____

Educator Approved _____ Date _____

Entered into Enrollment System _____

PART 2: PARENT INFORMATION

PARENT 1

Legal Guardian: Yes No

Name: _____ Parent Email: _____

(Fill in ONLY if DIFFERENT from front page)

Primary Phone (_____) ____-____ Secondary Phone (_____) ____-____

I prefer to be contacted by (circle one): phone email other (specify):

Address: _____

Street

City

Zip

PARENT 2

Legal Guardian: Yes No

Name: _____ Parent Email: _____

(Fill in ONLY if DIFFERENT from front page)

Primary Phone (_____) ____-____ Secondary Phone (_____) ____-____

I prefer to be contacted by (circle one): phone email other (specify):

Address: _____

Street

City

Zip

PART 3: CHILD/CUSTODIAL RELEASE

If there are any restrictions regarding the release of information or custody as to either parent, please provide on an additional sheet all such restrictions, and supporting documentation. If there is any uncertainty or lack of clarity regarding particular release issues, Cornell Cooperative Extension Livingston County will request a joint meeting with the parents and 4-H Leader to discuss and resolve such issues.

Parent/Guardian: Please initial: _____

PART 4: 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 my child 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 my child. 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 Parent/Guardian: Please initial: _____

PART 5: CODE OF CONDUCT

Our first priority is to create a safe, inclusive space for learning, sharing, and collaboration that is 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 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 Cornell 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 Extension staff, Event Coordinators, and NYS 4-H, 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 stands 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. 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.

PART 6: ACKNOWLEDGEMENT OF RISK

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

I hereby apply for my child to participate in the 4-H club/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 participant, accident, 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 5 for Cloverbud members and 8 for regular members required to participate in this activity and is able to participate in any strenuous physical activity associated therewith.

CORNELL COOPERATIVE EXTENSION OF LIVINGSTON COUNTY 4-H Program Year: October 1, 2018 through September 30, 2019

4-H Club Activity (please select anticipated program participation):

- All 4-H activities and events for the program year, including County, State, and National level
- Working with dogs
- Physical Fitness Program
- Shooting Sports

Cloverbud Members

- Cloverbud Activities
- Cloverbud working with equine or other animal programs

4-H Equine (Horse) Activities

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

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 executor. Any claim or disputes arising out of my child's participation in the activity shall be venued in the Supreme Court of the State of New York in the county where the County Extension office is location. 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.

Leader Signature (if applicable) _____ Date ____/____/____

PART 7: 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: #3 Custodial Release, #4 Photo Release, #5 Code of Conducts, and #6 Acknowledgement of Risk.

Youth Signature: _____ Date ____/____/____

Parent(s)/Guardian(s) (PRINT) _____

Parent(s)/Guardian(s) Signature(s) _____ Date ____/____/____

Cornell Cooperative Extension
Livingston County



CONTACT US!

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