

Cornell Cooperative Extension Livingston County



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Mt. Morris, NY 14510
t. 585.991.5420 – northern region
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f. 585.991.5434

4-H Youth Member Enrollment/Reenrollment Form

Directions: This form is intended for enrolling or reenrolling youth, ages 5-18, in the Livingston County 4-H Program. Complete all sections and return to CCE Livingston at the address above along with payment (cash or check payable to CCE Livingston). You may submit payment through our PayPal account (<http://ccelivingstoncounty.org/donate>). One packet can be used for all siblings living in the same household. Use the supplemental youth page, found on our website for additional youth in the family.

Fee: \$15 per youth or \$40 per family of 3 or more children. Enrollment waivers are available. Call the CCE Office for more information.

FOR OFFICE USE ONLY
DATE RECEIVED _____
PAYMENT AMOUNT: _____
CHECK # _____
CASH _____
PAYPAL DATE _____

FAMILY INFORMATION

Family Name _____ Primary Phone Number _____

Primary Email _____

Mailing Address _____ Town _____ Zip _____

Emergency Contact Name & Phone _____

Residence (check one): Farm Rural (Under 10K) Town/city (10K-50K)

Military (check all that apply): No one in my family is serving in the military

I have a parent who served/is serving in the military

I have a sibling who served/is serving in the military

Branch Component Air Force Army Marines Coast Guard

(Check all that apply): Navy DOD Civilian Space Force

Status: Active-Duty National Guard Reserves Retired

PARENT/GUARDIAN INFORMATION

Parent/Guardian 1

Name (first & last) _____ Legal Guardian Yes No

IF DIFFERENT FROM ABOVE

Email _____ Phone _____

Address _____ Town _____ Zip _____

Parent/Guardian 2

Name (first & last) _____ Legal Guardian Yes No

IF DIFFERENT FROM ABOVE

Email _____ Phone _____

Address _____ Town _____ Zip _____

Building Strong & Vibrant New York Communities

Cornell Cooperative Extension of Livingston County is an employer and educator recognized for valuing AA/EEO, Protected Veterans, and Individuals with Disabilities and provides equal employment and program opportunities.

YOUTH SECTION

YOUTH 1	Name (first & last)	Birthdate	Gender	Project Areas (list all project areas you plan to explore this program year) A list of possible project areas can be found here: http://ccelivingstoncounty.org/resources/project-pin-areas-1	Club Name – You can belong to more than one club, including Independent
	School Name	Grade Level			
	Race <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Prefer not to state	Are you of Hispanic Ethnicity? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Status (check one): <input type="checkbox"/> New Enrollment <input type="checkbox"/> Returning/Reenrollment				

YOUTH 2	Name (first & last)	Birthdate	Gender	Project Areas (list all project areas you plan to explore this program year)	Club Name – You can belong to more than one club, including Independent
	School Name	Grade Level			
	Race <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Prefer not to state	Are you of Hispanic Ethnicity? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Status (check one): <input type="checkbox"/> New Enrollment <input type="checkbox"/> Returning/Reenrollment				

YOUTH 3	Name (first & last)	Birthdate	Gender	Project Areas (list all project areas you plan to explore this program year)	Club Name – You can belong to more than one club, including Independent
	School Name	Grade Level			
	Race <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Prefer not to state	Are you of Hispanic Ethnicity? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Status (check one): <input type="checkbox"/> New Enrollment <input type="checkbox"/> Returning/Reenrollment				

PHOTO RELEASE

By signing this form, I consent and give Cornell Cooperative Extension Livingston the 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, press releases, etc. for promotion of CCE and CCE programs/services. I also grant CCE the right to distribute, display, broadcast, exhibit and market said photographs, 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 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/guardians authorized to sign this release.

Youth Name _____ Check: ____ Yes ____ No Parent/Guardian: Please initial: _____

Youth Name _____ Check: ____ Yes ____ No Parent/Guardian: Please initial: _____

Youth Name _____ Check: ____ Yes ____ No Parent/Guardian: Please initial: _____

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.
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.

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, 2022 through September 30, 2023

Name of Youth Participating	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.

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: **PHOTO RELEASE, CODE OF CONDUCT & ACKNOWLEDGEMENT OF RISK.**

Youth Name(s) Printed**Youth Signature(s)****Parent(s)/Guardian(s) (PRINT)****Parent(s)/Guardian(s) Signature(s)**

Date: __/__/__