Texas 4-H Member Enrollment Form

4-H Year: 2014-2015

❑Postal Mail ❑Email

Name (Last, First)	County	Family Email	Correspondence Preference

Member Email _____ **First Name** _____

Middle Name _____ **Last Name** _____

Preferred Name _____ **Mailing Address** _____

City _____ **State** _____

Zip Code _____ **Birth Date** _____

Gender ❑Male ❑Female **Primary Phone** _____

Cell Phone _____ **Years in 4-H** _____

Parent/Guardian 1

First Name _____ **Last Name** _____

Cell Phone _____ **Work Phone** _____

Work Extension _____

Parent/Guardian 2

First Name _____ **Last Name** _____

Cell Phone _____ **Work Phone** _____

Work Extension _____

Second Household

Send Correspondence ❑No ❑Yes **Correspondence Preference** ❑Postal Mail ❑Email

Family Name _____ **First Names** _____

Primary Phone _____ **Address** _____

City _____ **State** _____

Zip Code _____ **Email** _____

Emergency Contact

Name _____ **Phone** _____

Email _____ **Relationship** _____

Enrollment

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

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

Residence
- ❑Farm (rural area where agricultural products are sold)
- ❑Town under 10,000 and rural non-farm
- ❑Town/City 10,000-50,000 and its suburbs
- ❑Suburb of 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

Grade _____ **School Name** _____

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

Clubs

Enroll	Club	Volunteer Title if Applicable (Junior Leader or Teen Leader)
❑ (Enroll)		
❑ (Enroll)		
❑ (Enroll)		

Projects

Enroll	Project	Club	Volunteer Title	Years in Project
❑ (Enroll) ❑ (New Project)				
❑ (Enroll) ❑ (New Project)				
❑ (Enroll) ❑ (New Project)				
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❑ (Enroll) ❑ (New Project)				
❑ (Enroll) ❑ (New Project)				
❑ (Enroll) ❑ (New Project)				

Our signatures below indicate that:

- We give permission for photos or videotapes of the member to be reproduced for promotional or educational purposes.
- We give permission for the member to participate in and or complete surveys and evaluations that will be used to determine program effectiveness or to promote the program.
- We understand that participation in surveys and evaluations is voluntary and that the member may choose not to participate in surveys or evaluations without any impact on his or her eligibility to participate in the 4-H program.
- We understand that the member will be asked for his/her verbal consent before completing a survey or an evaluation.
- We understand that failure to abide by the Commitment to Excellence, Code of Conduct, and Consequences of Misbehavior may result in loss of membership privileges.

Member Signature _____ **Date** _____

Parent/Guardian Signature _____ **Date** _____

County Office Use Only

Received in County Office	Entered in 4-H CONNECT

Texas 4-H Youth Development Consequences of Misbehavior

Violators May Expect:
To have the opportunity to explain actions to the professional Extension staff in charge.
Behavior that is disruptive to the event will be documented and a letter describing such will be sent to the District 4-H Leadership Team, County Extension Agent(s) and parents/guardians of those involved. Examples of offenses are as listed below, but not limited to:

Minor Offenses

1. *Habitually late to program activities*
2. *Not in room at designated time*
3. *Not possessing good manners and using language that is offensive to others*
4. *Not respecting the rights and privacy of those rooming with or attending an activity*
5. *Lying or untruthfulness to chaperones, leaders, event organizers or others in attendance*

Intermediate Offenses

1. *Inappropriate visitation*
2. *Leaving a 4-H activity without the permission of staff member(s) in charge*
3. *Intentional damage to meeting site, sleeping quarters, person, or other person's property*
4. *Bullying*

Major Offenses

1. *Smoking or using tobacco products*
2. *The use of alcohol or drugs*
3. *Carrying an unauthorized weapon*
4. *Threatening another person with a weapon or bodily harm*
5. *Cheating*
6. *Sexual activities*
7. *Theft of any kind*
8. *Acting in a manner considered by 4-H leadership to be harmful or potentially harmful to the health or well-being of themselves or others, whether such act occurred within, or outside of the 4-H program*

Consequences

- For every offense 4-H member will receive a verbal reprimand.
- For every offense the violator shall write letters of apology to the appropriate people.

Major Offenses

- Automatic removal from event/activity and/or sending a participant home at the parent's/guardian's expense.
- One major offense during any 4-H year may lead to suspension of membership in all Texas 4-H Youth Development programs for the remainder of the 4-H year, along with the possibilities of facing criminal charges, pending offense. In addition, 4-H member may be asked to resign from all 4-H offices or leadership roles held or give up monetary awards or scholarships from the Texas 4-H program.

Intermediate Offenses

- One or two violations is grounds for removal from the event/activity and/or sending a participant home at the parent's/guardian's expense.
- Three violations during one calendar year is grounds for the 4-H member to not be allowed in any county, district or state activities for the remainder of the 4-H year. In addition, 4-H member may be asked to resign from all 4-H offices or leadership roles held or to give up monetary awards or scholarships from the Texas 4-H program.

Minor Offenses

- Consistent discipline problems requiring more than two reprimands is grounds for sending a 4-H member home at the parent's/guardian's expense.
- Habitual discipline problems requiring more than four reprimands during one calendar year is grounds for the 4-H member to not be allowed in any county, district or state activities for the remainder of the 4-H year. In addition 4-H member may be asked to resign from all 4-H offices or leadership roles held or to give up monetary awards or scholarships from the Texas 4-H program.

Course Of Action

Event managers responsible for 4-H events and activities are encouraged to communicate to 4-H participants and adult chaperones prior to the event a standard of acceptable behavior, via the Consequences of Misbehavior and Code of Conduct. Standards of behavior and consequences should be reviewed with participants as part of the initial orientation.

1. Event Manager obtains all the relevant facts.
2. Brief the on-site adult responsible for the youth delegate (Extension faculty member or 4-H volunteer).
3. If not on-site, but available via phone, brief the county Extension faculty member and District Extension Administrator responsible.
4. Review consequences of misbehavior. The following steps should be taken when sending a 4-H member home:
   Extension faculty member contacts parents.
   Parents advised that child is being sent home by safest, most direct means, and that parents are responsible for cost.
   Event manager decides if parents should be given the option of picking up the child.
   County Extension faculty member collects money from parent to pay transportation charges.
   Follow-up correspondence from event's manager to appropriate county Extension faculty member, District 4-H Leadership Team, child and parent for documentation.
5. For all reprimands a Summary Letter and Accident/Incident Report Form will be completed and mailed to the 4-H member, parent, County Extension Agents, District Extension Administrator, County Extension Directors (if applicable), 4-H Specialist, and Texas 4-H Youth Program Director.

I have read the Texas 4-H Consequences of Misbehavior and understand what violators may expect. I agree with the Code of Conduct and do intend to abide by it throughout my 4-H activities.

4-H Member Signature	County	District	Date

As the parent or guardian of _____, I have read the commitment and do support all points. I give permission to the professional Extension faculty in charge to carry out the Code of Conduct as described including inspection of rooms.

Parent or Guardian	Date

Texas 4-H Youth Development
2014-2015 Code of Conduct

TEXAS A&M AGRILIFE EXTENSION

During my 4-H involvement...

1. I am expected to attend all sessions that are part of the planned program for all activities. I will inform staff if I am not feeling well or have a schedule conflict.

2. I will dress appropriately to the occasion and adhere to any attire requirements stipulated for the event I am attending. 4-H members should be courteous and clean, and possess good manners.

3. Language must be controlled and appropriate for a 4-H member — I will not use language that is socially offensive.

4. Except for planned tours and outings, I will not leave an activity facility any time without permission of the chaperone and/or staff responsible for the event.

5. I will not smoke or use tobacco products, or be in possession of such products, at any 4-H program event.

6. I will not be in possession of, use alcohol or drugs (except those directed by a doctor), or be associated with or remain in the presence of others when they are being used.

7. I will not be in possession of, use, or threaten another person with a weapon, bodily force or language.

8. I will respect the rights of privacy of those attending an activity and those with whom I may be rooming.

9. I will observe hours established by the staff and be in my room. No boys in girls' rooms, no girls in boys' rooms.

10. I will avoid unnecessary roughness to room furnishings, furniture, equipment, etc. Towels, ashtrays, etc., are not to be taken as souvenirs. Occupants of a room or conveyance are financially responsible for any damage or results of misconduct.

11. Any participant at an official 4-H activity who observes a breach of the code of conduct has the responsibility and obligation to report the misbehavior to appropriate chaperones.

_____ _____

Date Member Signature

_____ _____

Date Parent/Guardian Signature

Educational programs of the Texas A&M AgriLife Extension Service are open to all people without regard to socioeconomic level, race, color, sex, disability, religion, age, or national origin.

2014-2015 TEXAS 4-H & YOUTH DEVELOPMENT PROGRAM

Program Name

CAMP & ENRICHMENT PROGRAM
WAIVER, INDEMNIFICATION, AND MEDICAL TREATMENT AUTHORIZATION FORM

1. EXCULPATORY CLAUSE. In consideration for receiving permission for my/my child's participation in any and all activities of **Texas 4-H** (herein referred to as "camp"), which is sponsored by **Texas A&M AgriLife Extension Service and Texas 4-H Youth Development Program**, (herein referred to as "sponsor"), I hereby release, waive, discharge, covenant not to sue, and agree to hold harmless for any and all purposes sponsor, The Texas A&M University System, the Board of Regents for The Texas A&M University System, Texas A&M AgriLife Extension Service, Texas 4-H Youth Development Program, Texas 4-H Youth Development Foundation, Texas A&M University, and their members, officers, servants, agents, volunteers, or employees (herein referred to as RELEASEES or INDEMNITEES) from any and all liabilities, claims, demands, injuries (including death), or damages, including court costs and attorney's fees and expenses, that may be sustained by me/my child while participating in such activity, while traveling to and from the activity, or while on the premises owned or leased by RELEASEES, **including injuries sustained as a result of the sole, joint, or concurrent negligence, negligence per se, statutory fault, or strict liability of RELEASEES**. I understand this waiver does not apply to injuries caused by intentional or grossly negligent conduct.

2. INDEMNITY CLAUSE. I am fully aware that there are inherent risks to my child, myself and others involved with this activity, including but not limited to all events and activities, and I choose to voluntarily participate/allow my child to participate in said activity with full knowledge that the activity may be hazardous to me, my child and my property, and to the person and property of others. I acknowledge there may be physically strenuous activities. I know of no medical reason why I/my child should not participate. **I agree to indemnify and hold harmless INDEMNITEES** from any and all liabilities, claims, demands, injuries (including death), or damages, including court costs and attorney's fees and expenses, which may occur to myself, my child, other participants, and third-persons as a result of my/my child's participation in said activity, **including injuries sustained as a result of the sole, joint, or concurrent negligence, negligence per se, statutory fault, or strict liability of INDEMNITEES**.

3. NO INSURANCE. I understand that RELEASEES may or may not maintain any insurance policy covering any circumstance arising from my/my child's participation in this activity or any event related to that participation. As such, I am aware that I should review my personal insurance coverage. Organization may not carry general liability insurance to cover claims arising from this activity so it seeks a waiver of claims as additional consideration for the right to participate so organization, can (a) provide the activity at the lowest possible cost to participants; and (b) provide access to a greater number of participants by expending limited resources on program materials rather than on liability insurance.

4. BINDS HEIRS. It is my express intent that this agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representatives, if I am deceased, and shall be governed by the laws of the State of Texas.

5. MEDICAL AUTHORIZATION, INDEMNITY FOR MEDICAL EXPENSES, and WAIVER. I understand RELEASEES cannot be expected to control all of the risks articulated in this form and RELEASEES may need to respond to accidents and potential emergency situations. Therefore, I hereby give my consent for any medical treatment that may be required, as determined by a medical professional at the medical facility, during my/my child's participation in this activity with the understanding that the cost of any such treatment will be my responsibility. I agree to indemnify and hold harmless INDEMNITEES for any costs incurred to treat me/my child, even if an INDEMNITEE has signed hospital documentation promising to pay for the treatment

due to my inability to sign the documentation. I further agree to release, waive, discharge, covenant not to sue, and agree to hold harmless for any and all purposes, RELEASEES from any and all liabilities, claims, demands, injuries (including death), or damages, including court costs and attorney's fees and expenses, that may be sustained by me/my child while receiving medical care or in deciding to seek medical care, including while traveling to and from a medical care facility, **including injuries sustained as a result of the sole, joint, or concurrent negligence, negligence per se, statutory fault, or strict liability of RELEASEES**. I understand this waiver does not apply to injuries caused by intentional or grossly negligent conduct.

6. VOLUNTARY SIGNATURE. In signing this agreement I acknowledge and represent that I have read it, understand it, and sign it voluntarily as my own free act and deed; sponsor has not made and I have not relied on any oral representations, statements, or inducements apart from the terms contained in this agreement. I execute this document for full, adequate and complete consideration fully intending to be bound by the same, now and in the future. I understand I can choose not to sign this document and free myself and my child from its terms and the associated risks of the activity by simply not participating in the activity and choosing some other activity available to me/my child that has a lower level of risk to myself and my child. I further understand this is a voluntary, extracurricular activity. While I understand alternative activities are available to me/my child that do not have the risks associated with this activity I still desire to voluntarily engage/ permit my child to engage in this activity.

SIGNING THIS DOCUMENT INVOLVES THE WAIVER OF VALUABLE LEGAL RIGHTS.
CONSULT YOUR ATTORNEY BEFORE SIGNING THIS DOCUMENT.

SIGNED this _____ day of _____ , 20 _____

Participant Signature: _____

Printed Name: _____

Participant's Date of Birth: _____

Parent or Legal Guardian Signature:
(If participant is under 18 years old) _____

Parent or Legal Guardian Printed Name:
(If participant is under 18 years old) _____

In case of emergency, contact _____

at the following number _____

If the participant has medical insurance, please indicate:

Insurance Company: _____

Policy Number: _____

Name of Primary Policy Holder: _____

Please list any special services your child may require: _____

Texas 4-H Youth Development
2014-2015 Media/Photograph Release

TEXAS A&M AGRILIFE EXTENSION

I understand the photograph(s) or video or audio recording(s) taken of me by agents, employees or representatives of the Texas A&M AgriLife Extension Service and its Texas 4-H Youth Development Program (hereinafter called "the Agency") shall be used in connection with the Agency's dissemination of information by its public service and academic programs to the general public.

I hereby irrevocably authorize the Agency to copy, exhibit, publish or distribute any and all such images and audio of me or wherein I appear, including composite or artistic forms and media, for purposes of publicizing Agency programs or for any other lawful purpose. In addition, I waive any right to inspect or approve the finished product, including written copy, wherein my likeness appears.

I hereby hold harmless and release and forever discharge the Agency from all claims, demands and causes of action which I, my heirs, representatives, executors, administrators or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

_____ _____
Date Member Signature

_____
Printed Name

_____
Street Address

_____
City/State/Zip Code

(If the person signing is under age 21, there should be consent by a parent or guardian, as follows:)

I hereby certify that I am the parent or guardian of _____, the minor named above, and do hereby give my consent without reservations to the foregoing on behalf of this person.

_____ _____
Date Parent/Guardian Signature

_____
Parent/Guardian Printed Name