



Erie County 4-H Program—New Member 2024—2025 Youth Application


NEW MEMBER
DEADLINE: May 1, 2025

Cornell Cooperative Extension of Erie County, 21 South Grove Street, East Aurora, NY 14052

Please complete the information –This information will be used for 4-H communications:

Personal Information (please print neatly):

Family Email: _____ Member Email (if applicable): _____

First Name: _____ Last Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Birth Date: _____ Age: _____ Gender: _____

School Information— Public School Private School

School District: _____ School Name: _____ 2024-2025 Grade: _____

Parent/Guardian Information

Parent/Guardian 1:

First Name: _____ Last Name: _____

Cell Number: _____

Parent/Guardian 2:

First Name: _____ Last Name: _____

Cell Number: _____

Demographic Information

Ethnicity: Are you of Hispanic or Latino ethnicity? YES NO

Race: White Black or African American American Indian or Alaskan Native Hawaiian & Pacific Islander
Asian Prefer Not to State

Residence: Farm Town<& rural non-farm Town 10k-50k & suburbs Suburbs of City>50K Central City>50K

Military Service of Family

Family Member Military Service: No one in my family is serving I have a parent serving I have a sibling serving

Branch: _____ Active Reserve National Guard

4-H Enrollment Fee \$25/Youth or \$50/family (2 or more youth from the same household enrolled in the Erie Co. 4-H program.)

Please make check payable to: CCE of Erie County Cash or Check amount paid _____ Check/Receipt # _____

2024-2025 4-H Club Information—Must be filled out

_____ I will be an Independent Member

_____ I am looking for a Club to Join

_____ I am a member of a Club _____

Primary Club Leader Signature(If applicable): _____ Date _____

General 4-H Information



Member enrollment is due before participation in any 4-H event, meeting or project. You must have your application on file with the 4-H Office by May 1, 2025 in order to participate in Livestock/Animal Programs, Public Presentations, Textile Review, Duds to Dazzle and for the 2025 Erie County Fair.

Club Members—return these form with your enrollment fee to your leader unless otherwise instructed by your leader.

Independent Members— return forms to CCE of Erie County, 4-H Office, 21 South Grove Street, East Aurora, NY 14052

Questions? Please call 652-5400 ext. 131

2021-2022 4-H Project Participation (Please check all 4-H Projects that you plan to participate in)

4-H Livestock-Please note: Participation in some livestock projects is limited by age.

Leasing programs subject to availability

- | | | |
|---|---|---|
| <input type="checkbox"/> Market Steer | <input type="checkbox"/> Breeding Beef | |
| <input type="checkbox"/> Market Poultry | <input type="checkbox"/> Market Turkey | <input type="checkbox"/> Exhibition/Production Poultry |
| <input type="checkbox"/> Market Sheep | <input type="checkbox"/> Breeding Sheep | <input type="checkbox"/> Sheep Leasing Program |
| <input type="checkbox"/> Market Swine | <input type="checkbox"/> Breeding Swine | <input type="checkbox"/> Swine Leasing Program |
| <input type="checkbox"/> Market Goat | <input type="checkbox"/> Working Goat | <input type="checkbox"/> Dairy Goat <input type="checkbox"/> Goat Leasing Program |
| <input type="checkbox"/> Market Rabbit | <input type="checkbox"/> Rabbits/Cavies | |
| <input type="checkbox"/> Dairy Cattle | <input type="checkbox"/> Dairy Cattle Leasing Program | <input type="checkbox"/> Dairy Steer |
| <input type="checkbox"/> Horses | <input type="checkbox"/> Dogs | <input type="checkbox"/> Llamas/Alpacas |

General

- | | | | | |
|--|--|--|--|-------------------------------------|
| <input type="checkbox"/> Cloverbud Projects (ages 5-7) | <input type="checkbox"/> Arts & Crafts | <input type="checkbox"/> Food & Nutrition | <input type="checkbox"/> Community Service | |
| <input type="checkbox"/> Photography | <input type="checkbox"/> Textiles & Clothing | <input type="checkbox"/> Ornamental Horticulture | <input type="checkbox"/> Woodworking | <input type="checkbox"/> Electrical |
| <input type="checkbox"/> Shooting Sports (ages 12-18) | <input type="checkbox"/> Teen Ambassador (ECTA—ages 13-18) | | | |

Photo and Image Release

Cornell Cooperative Extension of Erie County (CCE) is granted permission to use and/or publish my child's photograph(s) or image (including audio, 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 no-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. The 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 and authorized to sign this release.

Name of Child: _____

Name of Parent/Guardian: (PRINT) _____

Signature: _____ Date: _____



ACKNOWLEDGEMENT OF RISK

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

Incomplete forms will be returned and youth will not be permitted to participate in club programs or activities.

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 for Cloverbud Members and 8 for Regular 4-H Members** required to participate in this activity and is able to participate in any strenuous physical activity associated therewith.

Cornell Cooperative Extension of Erie County

4-H Program Year: October 1, 2024 – September 30, 2025

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

- All 4-H activities and events for program year
- Working with dogs
- Physical Fitness programs
- Shooting Sports

CLOVERBUDS(youth 5-8 years old only):

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

4-H EQUINE(Horse) ACTIVITIES

- 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.*

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 Supreme Court of the State of New York of the County 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 _____

DATE OF BIRTH: _____

ADDRESS: _____

PARENT GUARDIAN NAME (print): _____

SIGNATURE: _____ **DATE:** _____



This form must be kept on file until participant reaches age 21.

NYS 4-H PERMISSION SLIP

Information in this form will be used to help ensure a safe, positive experience for you and/or your child. Only Cornell Cooperative Extension and 4-H staff (including the event coordinator and medical director) will be able to view this form and information will only be used as needed.

4-H Program Year: October 1, 2024 – September 30, 2025

Participant Information (please print):

Participant's Name: _____ Date of Birth: _____

Parent/Guardian Name: _____ Parent/Guardian Phone: _____

Address (city, state, and zip code): _____

Home Phone: _____ Cell Phone: _____

Emergency Contact Name: _____ Phone: _____

Relationship to Member: _____

Medical Release

Family Medical and Hospitalization Coverage

Type of Insurance Coverage: _____ Subscriber of Policy: _____

Address of Insurance Company: _____ Identification/Policy #: _____

Family Physician's Name: _____ Phone: _____

Medical History – please check all that apply

Date of Last Tetanus Booster: _____

Current Prescribed Medication (specify): _____

Medical Conditions

Ear Infections

Rheumatic Fever

Convulsions

Diabetes

Asthma

Other (specify): _____

Allergies

Hay Fever

Insect Stings

Ivy Poisonings

Penicillin

Other (specify): _____

Food Allergies/Dietary Restrictions

Peanuts

Milk

Eggs

Tree Nuts

Seafood/Shellfish

Gluten Products

Other (specify): _____

Please specify any other health concerns, physical activity restrictions, and/or any other information you want 4-H staff and chaperones to be aware of on behalf of your child's welfare: _____

Parent/Guardians

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.

PARENT GUARDIAN NAME (print): _____

SIGNATURE: _____ **DATE:** _____





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.



Youth Name: _____

- 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 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. 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

