



4-H Member Enrollment Form



Club Name or Independent Member: _____

FOR OFFICE USE ONLY County Code: _____ Club Code: _____ Member Code: _____

Category (Circle One): Member (ages 9-18) Cloverbud (ages 5-8)

Enrollment Type (Circle One): N - New Enrollment R - Re-Enrollment

Last Name: _____ First Name: _____ M.I. _____

Address: _____ City: _____ State: _____ Zip: _____

Phone # (_____) _____ E-mail: _____

Gender: _____ Birthdate: ____/____/____ 4-H Age (as of Jan. 1st this year): _____ Year In 4-H: _____

School: _____ Grade: _____ Youth Leader: (Y/N) _____

Ethnic (circle one): 1) Hispanic 2) Not Hispanic

Race: (circle one): 1) Caucasian 2) African American 3) Alaskan/Am. Ind. 4) Asian
5) Hawaiian/Pac. Island 6) American Indian 7) Not listed

Residence (circle one): 1) Farm 2) rural/10,000 3) Town/10-50,000 4) Fort Drum

Project Name	Project Code	Youth Leader	Years in Project
_____	_____	Yes / No	_____
_____	_____	Yes / No	_____
_____	_____	Yes / No	_____
_____	_____	Yes / No	_____
_____	_____	Yes / No	_____

Yes / No (please circle one) **Do you require an accommodation for a disability to participate in this program?**

Yes / No (please circle one) **Do you work with horses in any way through 4-H?**

Yes / No (please circle one) **Cornell Cooperative Extension is granted permission to use and/or publish my or my child's photograph or image (including audio, film, digital image or any other media) for educational programs, websites or promotion of Extension programs.**

____ Check here if you **do not** want the 4-H office to reveal your name, address, or phone number as part of public record or list.

Member Signature: _____ **Leader Signature:** _____

Parent / Guardian Signature: _____ **Date:** _____



4-H Enrollment - Parent Information

FOR OFFICE USE ONLY Parent Code 1: _____

Parent Last Name: _____ First Name: _____ M.I. _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: (____) _____ - _____ Work Phone (____) _____ - _____ Cell Phone :(____) _____ - _____

Parent Type (circle one): Primary Parent Additional Parent Other **Occupation:** _____ (optional)

Legal Guardian: Yes / No Send Mailing: Yes / No E-mail: _____

Current Military Status: [] N/A [] Active Duty [] Retired [] Reserve [] National Guard

Branch of the Service: [] Army [] Air Force [] Marine [] Navy [] Coast Guard

FOR OFFICE USE ONLY Additional Contact Code 2: _____

Parent Last Name: _____ First Name: _____ M.I. _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: (____) _____ - _____ Work Phone (____) _____ - _____ Cell Phone :(____) _____ - _____

Parent Type (circle one): Primary Parent Additional Parent Other **Occupation:** _____ (optional)

Legal Guardian (circle one): Yes / No Send Mailing: Yes / No E-mail: _____

Current Military Status: [] N/A [] Active Duty [] Retired [] Reserve [] National Guard

Branch of the Service: [] Army [] Air Force [] Marine [] Navy [] Coast Guard

4-H Code of Conduct

The following guidelines have been adopted to insure the education, safety and enjoyment of participating Jefferson County youth in 4-H Youth Development programs and activities. These guidelines also clarify the role and responsibilities of persons in charge.

- Obey all regulations set forth at scheduled events.
- Behave in a polite manner that respects the rights and feelings of others.
- Be on time and at designated meeting places.
- No alcohol or illegal drugs may be used.
- Smoking and use of tobacco products is prohibited for those under 18 years. For those persons over 18 years of age, smoking should be limited to designated areas and times.
- Listen to and cooperate with persons in charge.
- Clothing should be appropriate to the event in which you are participating.
- Some programs will require 4-H members to carry completed health and parental permission forms on them at all times.

Behavior problems occur rarely during Cornell Cooperative Extension Association of Jefferson County's 4-H Youth Development programs. If they do occur, persons in charge will deal with them immediately. In cases of repeated unacceptable behavior, the parent or guardian will be notified to make arrangements for the youth to be returned home at the family's expense.

I, _____ (4-H Member) have read the "Code of Conduct" and understand it.

4-H Member's Signature _____ Date _____

Parent/Guardian Signature _____ Date _____