

**4-H Youth Enrollment Form**

4-H Year 2022 - 2023

(Please Print)

County:

Family Name

Family Email

Email

(If different than family email)

First Name

Middle Name

Last Name

Suffix

Preferred Name

Mailing Address

Mailing Address 2 (if applicable, Apt #)

City

State

Zip Code

Birth Date (mm/dd/yyyy)

Gender

 Male Gender Identity Not Listed Non-binary Female Prefer Not To Respond

Primary Phone

()

Cell Phone ()

Years in 4-H:

Grade in School as of Oct. 1, 2022

Parent/Guardian 1

First Name

Last Name

Cell Phone

Work Phone

Parent/Guardian 2

First Name

Last Name

Cell Phone

Work Phone

Second Household (if applicable)

Second Household Family Name

Primary Phone

Address

City

State

Zip Code

Email

Phone

Emergency Contact

Name

Phone

Email

Relationship

Emergency Contact 2

Name

Phone

Email

Relationship

Purdue University Cooperative Extension Service is an equal access/equal opportunity institution.

Program Fee Payment Date: _____ Cash/Check # _____ Received Date: _____ 4HOnline Entry Date: _____ Entered By: _____

Enrollment

| | | |
|------------------------------------|---|--|
| Ethnicity | Are you of Hispanic ethnicity? <input type="checkbox"/> No <input type="checkbox"/> Yes (please indicate both an ethnicity and a race) | |
| Race (check all that apply) | <input type="checkbox"/> White | <input type="checkbox"/> Native Hawaiian or Pacific Islander |
| | <input type="checkbox"/> Black | <input type="checkbox"/> Asian |
| | <input type="checkbox"/> Native Indian or Alaskan Native | <input type="checkbox"/> Prefer Not to State |
| Residence | <input type="checkbox"/> Farm (rural area where agricultural products are sold) | <input type="checkbox"/> Suburb of city more than 50,000 |
| | <input type="checkbox"/> Town under 10,000 and non-farm | <input type="checkbox"/> Central city more than 50,000 |
| | <input type="checkbox"/> Town/City 10,000 – 50,000 and its suburbs | |
| Military | <input type="checkbox"/> No one in my family is serving in the military <input type="checkbox"/> I have a parent serving in the military | |
| | <input type="checkbox"/> I have a sibling serving in the military | |
| Branch | <input type="checkbox"/> Air Force <input type="checkbox"/> Army <input type="checkbox"/> DOD Civilian <input type="checkbox"/> Marines <input type="checkbox"/> Navy | |
| Component | <input type="checkbox"/> Active Duty <input type="checkbox"/> National Guard <input type="checkbox"/> Reserves | |
| School County | School District | |
| School Name | | |
| School Type | <input type="checkbox"/> Public | <input type="checkbox"/> Homeschool/Alternative |
| | <input type="checkbox"/> Private | <input type="checkbox"/> Magnet/Specialized |
| | <input type="checkbox"/> Special Education | <input type="checkbox"/> School |
| | <input type="checkbox"/> Vocational | <input type="checkbox"/> Charter School |
| | | |

Authorizations

4-H Youth Development Liability Release

I understand that participating in 4-H activities can involve certain risks to my child. Those risks may include injury or harm, including, but not limited to, bodily injury, disability, exposure to COVID-19 and other viruses and or illnesses, and death. During virtual 4-H activities, I understand that program staff are not providing supervision for my child during the online program, and the Released Parties do not have control over the information available through the internet or other electronic data sources beyond that which is a part of the 4-H activity. On behalf of my child I fully assume the inherent risks associated with my child participating in 4-H activities and assert that my child has chosen to participate in this program with my express approval. I hereby release and discharge Purdue University, The Trustees of Purdue University, the County Commissioners, the County Cooperative Extension Service, and each of their trustees, officers, appointees, agents, employees, and volunteers ("Released Parties") from all claims which my child or I might have for any injury or harm to my child, arising out of my child's participation in any activity related to the 4-H program, even if such injury or harm is caused by the negligence or fault of any of the Released Parties. I do not, however, release these individuals and entities from liability for intentional, willful or wanton acts and this release shall not be construed to include such acts.

- We have read and agree to the terms.

Parent/Legal Guardian and Member Statement

I (we) understand, agree to abide by, follow, and comply with the rules, policies and expectations of the 4-H program and will conduct myself (ourselves) in a courteous and respectful manner by exhibiting good sportsmanship and being a positive role model for youth. I (we) also understand that failing to do so will constitute grounds for sanctions against and/or dismissal of me (us) and/or the member from the program

- We have read and agree to the terms.

Photo Policy Statement

I (we) grant permission to the 4-H Youth Development program to use videos or photographs of my (our) child for educational purposes or promotion of 4-H and/or Purdue Extension programs.

- I agree to the photo policy statement
 I do not agree to the photo policy statement

We have read and completed all required authorization sections above.

Member Signature: _____ Date: _____

Adult Signature: _____ Date: _____

4-H Clubs

All youth must belong to at least **one** 4-H club. Please list each 4-H Club the youth is a member. If the youth has a youth volunteer role for that club in 2020, please list the role. Examples: 4-H Club President, 4-H Club Vice President, 4-H Club Officer etc. Note: All Volunteer roles are subject to County Office approval. If you have membership in more 4-H clubs than space allows, please attach an additional sheet as needed.

| Enroll | Club Volunteer Role (if any) |
|-------------------------------|------------------------------|
| <input type="checkbox"/> Club | |
| <input type="checkbox"/> Club | |
| <input type="checkbox"/> Club | |
| <input type="checkbox"/> Club | |

Projects/Subject Matter

Please list each Project/Subject Matter area the youth wishes to enroll. List the club under which the member wants to enroll this project/subject matter and the number of years (including this year) the member has taken the project/subject matter area. Please contact your County Extension Office for a complete list of offered Projects. If you wish to enroll in more projects than space allows, please attach an additional sheet as needed.

| Enroll | Project | Club | Years in Project |
|----------------------------------|---------|------|------------------|
| <input type="checkbox"/> Project | | | |
| <input type="checkbox"/> Project | | | |
| <input type="checkbox"/> Project | | | |
| <input type="checkbox"/> Project | | | |
| <input type="checkbox"/> Project | | | |
| <input type="checkbox"/> Project | | | |
| <input type="checkbox"/> Project | | | |
| <input type="checkbox"/> Project | | | |
| <input type="checkbox"/> Project | | | |
| <input type="checkbox"/> Project | | | |

Groups

Please list each Group/Committee in which you serve as a youth representative, excluding Club Volunteer. Examples include county 4-H fair board, county 4-H council, county livestock committee, etc. If you have not been assigned as a Youth Volunteer/Representative to a group or committee by your County 4-H Youth Extension Educator, please leave the spaces below blank.

| Enroll | Group |
|--------------------------------|-------|
| <input type="checkbox"/> Group | |
| <input type="checkbox"/> Group | |
| <input type="checkbox"/> Group | |
| <input type="checkbox"/> Group | |
| <input type="checkbox"/> Group | |