



## Deschutes County 4-H MEMBER ENROLLMENT FORM

### Oregon State University Extension Service

Name \_\_\_\_\_  
Last
First
Middle initial

(Parent/Guardian) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Community/ School: \_\_\_\_\_

<b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Racial Group:</b> <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> Native American or Alaskan Native <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> More than one race	<b>Residence:</b> <input type="checkbox"/> Farm (income from farming \$1,000+/year) <input type="checkbox"/> Rural non-farm & Town (pop. under 10,000) <input type="checkbox"/> City of 10,000 to 50,000 <input type="checkbox"/> Suburb of city over 50,000 <input type="checkbox"/> City of 50,000 or more
<b>Ethnicity:</b> <input type="checkbox"/> Hispanic <input type="checkbox"/> Not Hispanic		

Grade: \_\_\_\_\_ Number of years in 4-H, grades 4 – 12: (include this year) \_\_\_\_\_

Phones:

Description	Area Code	Number	Extension
Home			
Parent's Work			
Parent Cell			
My Cell			

Parent Email \_\_\_\_\_

My E-mail \_\_\_\_\_

Club \_\_\_\_\_  
club name
club number

I will be assisting this club as a youth leader

I plan to enroll in more than one club this year

**Projects** (see project identification codes on the back) Description and Code required; Level/Phase as appropriate.

Description	Code	Level	Phase	\$ Due
				\$7
				\$7
				\$7
				\$7
Administrative Fee			Per Member	\$5
<i>Over the Clover</i> Newsletter			Per Family	\$10 <i>Make checks payable to DCLA</i>

**Our signatures below indicate that:**

- \* We give permission to use member's image and voice on videotape, audiotape, film, photograph, or in any other medium, including the World Wide Web for educational, fundraising, or promotional purposes. We give permission to release member's name and hometown to news media for recognition 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 a 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 or her verbal assent before completing a survey or an evaluation.
- \* We understand that failure to abide by the policies and regulations governing the 4-H program may result in loss of membership privileges.

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
 Member's Signature Date Parent's Signature

Code	Description
<b>RACIAL GROUP CODES</b>	
1	White
2	Black or African American
3	Native American or Alaskan Native
4	Asian or Pacific Islander
5	More than one race
<b>RESIDENCE CODES</b>	
1	Farm
2	Towns and Rural Non-Farm
3	City 10,000 to 50,000
4	Suburb of city over 50,000
5	City of 50,000 or more
<b>PROJECT CODES (statewide curriculum available*)</b>	
<b>Citizenship and Civic Education</b>	
110	Citizenship*
120	Cultural Education
130	World Citizenship/International Programs
<b>Communications and Expressive Arts</b>	
211	Public Speaking*
212	Creative Writing
221	Clowning
222	Dance
223	Drama
224	Music
231	Art*
235	Ceramics*
236	Cake Decorating
241	Photography*
242	Graphic Arts
251	Leather Craft*
261	Fiber Arts*
<b>Consumer and Family Sciences</b>	
310	Child Care/Development*
311	Babysitting*
320	Clothing and Textiles*
330	Consumer Education
340	Home Environment*
350	Parenting and Family Life
360	Knitting*
370	Crocheting*
<b>Natural Sciences</b>	
410	Project WILD*
411	Environmental Stewardship*
412	Wildlife Stewards*
413	Water Quality/Watershed Education*
414	Sportfishing & Aquatic Education*
421	Geology*
422	Weather
423	Marine Science*
431	Energy
441	Forestry*
442	Range Science/Native Plants
443	Wildlife
451	Outdoor Education/Recreation
452	Challenge
460	Shotgun*
461	Archery*
462	Rifle*
463	Pistol*
<b>Nutrition and Health</b>	
503	OFNEP
511	Foods and Nutrition*
512	Food Preservation*
513	EFNEP*
520	Health
531	Safety
532	Tractor/Machinery Certification*
533	Search and Rescue
534	Bicycle Safety*
535	Auto Safety
536	ATV Safety

<b>Personal Development and Leadership</b>	
612	Economics, Business & Marketing
620	Leadership Development
621	Junior Leadership*
623	4-H Ambassador
631	Camp Counselor
641	Leisure Education
651	Hobbies and Collections
<b>Plants and Animals</b>	
711	Crops
712	Gardening, Vegetables & Herbs*
713	Gardening, Flowers & Ornamentals*
714	House Plants
715	Ornamental Horticulture
716	Container Gardening
721	Beef*
731	Poultry*
732	Pigeons*
741	Dairy Cattle*
751	Horse and Pony*
761	Rabbits*
762	Cavies*
763	Dogs*
764	Guide Dogs
765	Cats
766	Small Animals*
771	Sheep*
781	Swine*
791	Goats – Dairy*
792	Goats – angora
793	Goats – Pygmy*
795	Goats – Meat
799	Llamas
<b>Science and Technology</b>	
821	Entomology*
822	Bee Keeping
831	Veterinary Science*
851	Aerospace
852	Rocketry
861	Computer
862	Electricity/Electronics*
871	Wood Science*
881	Tractors and Equipment*
882	Small Engines
<b>Adventures/K-3 Programs</b>	
All <b>club</b> members in grades K-3 are considered to be in the 4-H Adventures Program. Adventure members may be enrolled in any or all of the following <b>non-competitive</b> general curriculum areas.	
911	General Adventures*
100	Citizenship and Civic Education*
200	Communication and Expressive Arts*
300	Consumer and Family Sciences*
400	Environmental and Natural Sciences*
500	Healthy Lifestyle Education*
700	Plants and Animals*
800	Science and Technology*
513	EFNEP*
Youth in grades K-3 may participate in other <b>non-competitive</b> group activities, through school or after school programs. Participation in <b>group</b> activities should be reported on the group participation form.	
For specific 4-H Adventures Program guidelines and available curriculum, please consult your local OSU Extension 4-H Office.	

# OFFICIAL 4-H HEALTH FORM

Rev. 1.07

County \_\_\_\_\_

Type of activity: \_\_\_ county/area \_\_\_ state \_\_\_ regional \_\_\_ national

Name of event/activity \_\_\_\_\_

Participant's Name: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address  
 \_\_\_\_\_  
City State Zip Code

Participant is: \_\_\_ Adult \_\_\_ Youth \_\_\_ Male \_\_\_ Female \_\_\_  
Grade Birth Date Home phone

Emergency Contact: \_\_\_\_\_  
Name Relationship  
 \_\_\_\_\_  
Daytime phone Evening phone

## Health Statement (to be completed by parent, physician or adult participant)

Is the participant currently under medical treatment? (describe)	Yes	No	Does the participant have any history of respiratory illness? (describe)	Yes	No
Is the participant diabetic?	Yes	No	Is the participant subject to seizures of any kind?	Yes	No
Date of last tetanus shot?					
Is there any medical condition (heart condition, etc.) or malformation now existing that may require treatment or affect the participant's participation in this program?				Yes	No
Has the participant had recent surgical operations or accidents or been exposed to infectious disease within the last two weeks? (Please bring notification to the activity if this changes prior to the event)				Yes	No
Does the participant have any allergies or dietary restrictions? If yes, please describe:				Yes	No
Name of all medications:					
Name and phone number of physician:					
<b>Insurance Carrier</b>			<b>Policy Number</b>		

Accommodations\*: OSU and the 4-H Youth Development Program do not discriminate against otherwise qualified participants with disabilities on the basis of disability, Are there any accommodations that you are requesting for yourself or your child in order to participate in the 4-H Youth Development Program?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please describe: \_\_\_\_\_

\*Accommodations may include: speech, hearing or vision impairments that may effect participation, behavior disorders or emotional disturbances or abnormally severe moodiness, sleepwalking, and the ability to carry heavy objects, participate in strenuous travel or physical labor.

As parent or guardian, if my child needs medical attention, I understand every effort will be made to contact me. I hereby give permission to the medical personnel selected by the person in charge of the 4-H event to order x-rays, routine tests, treatment, release any records necessary, and to provide or arrange necessary related transportation for the person named on this form. I hereby give permission to the physician selected by the person in charge of the 4-H event to hospitalize, secure emergency treatment for, to order injection, anesthesia, and/or surgery for me or my child as named on this form. I will assume all financial obligations incurred if not covered by insurance.

\_\_\_\_\_  
 Signature of Parent/Guardian or Adult participant

\_\_\_\_\_  
 Date

**OREGON 4-H YOUTH DEVELOPMENT PROGRAM**  
**CODE OF CONDUCT** revised 9 -06

The mission of 4-H is to teach subject matter and life skills through a process that helps young people meet key developmental needs. To do this, 4-H must create an environment that is conducive to learning and growth. Consequently, 4-H requires that members adhere to certain standards of behavior and conduct as they participate in 4-H. The following are expected of all members.

Members must demonstrate a commitment to the vision, mission, and core values of the Oregon 4-H Youth Development Program. Actions not in the best interest of 4-H will not be tolerated.

Show respect and courtesy to other youth, adults, volunteers, and Extension faculty and staff.

Use language that is appropriate and respectful of others. No swearing is allowed.

No harassment, bullying or hazing, discriminatory language, roughhousing, or insubordination will be tolerated.

All members are expected to abide by Federal, state and local laws. They are also expected to abide by policies and guidelines of the Oregon State University, OSU Cooperative Extension Service, and the Oregon 4-H Youth Development Program.

Members are expected to know and follow rules established for specific events and are expected to attend all parts of a planned program. Members should inform those in charge if they are not feeling well or have a schedule conflict.

Participants in 4-H activities or events are not to leave the assigned program area (campsite, campus, cabins, or dormitories) at any time without written permission from the person in charge except when movement to another location is a part of the planned program.

Members must dress appropriately for the occasion. Many times, dress codes describe what is considered acceptable attire for a specific event or activity.

Members are expected to treat animals humanely and provide appropriate animal care.

Youth old enough to legally operate motor vehicles (including machines and equipment) may do so only with a valid operator's license, and the legally required insurance coverage. Members must have both authorization from the 4-H staff member in charge of the event and parental permission to drive to out-of-county events. Members must operate vehicles in a safe and responsible manner. All passengers must wear seat belts.

Members must show respect for the property and facilities used during an event or activity and will assume responsibility for any damage they cause.

During overnight activities, members are expected to observe hours designated to be in the rooms provided. Boys are not allowed in areas designated for "girls only" nor are girls allowed in areas designated for "boys only."

Members will not use tobacco, alcohol, drugs (except those directed by a doctor) or fireworks or remain in the immediate area where these are being used. Members may only handle firearms in secured, designated areas under the direct supervision of a trained 4-H Shooting Sports leader.

4-H events encourage interaction among peers, but not exclusively with another person. Kissing and other sexual displays of personal affection distract from the group and are not appropriate behavior.

I have read and agree to the above Code of Conduct. I understand that violations may result in loss of eligibility to participate in future 4-H Youth Development events and activities or loss of membership privileges. Violations while participating in out-of-county events may result in the member being sent home at the expense of the parent or guardian.

\_\_\_\_\_ Date \_\_\_\_\_  
Member Signature

\_\_\_\_\_ Date \_\_\_\_\_  
Parent/Guardian Signature