

## **New Jersey 4-H Event Permission Form for Youth**



Both sides of this form must be completed by all youth participating in overnight activities, field trips, events requiring group transportation, and any other events sponsored through the 4-H Youth Development Program where it is deemed necessary by the event coordinator(s) (paid 4-H staff and/or registered 4-H volunteer) responsible for the youth participants. The form should be submitted prior to the event. The form has five parts: (1) information about the participant and activity, (2) parental permission and liability release, (3) medical emergency authorization and health information, and (4) code of conduct and (5) media policy. Be sure to complete all five parts and sign where requested!

## Information about the Youth Participant and Activity

Name of Youth participant:				
Address:	City:	State:	Zip:	
Telephone number:	Email Address:			
4-H county:	Birthdate:			
Name of activity/event:				
Name of 4-H group sponsoring or participating	in this event:			
Location of event:				
Date and time of participation of individual nam	ed above:			
Parent Pe	ermission and Release of Liab	·	perative Extension and	
its event coordinator(s) will use the utmost precarelease them and their Cooperating Agencies: Ru County Boards of Chosen Freeholders, from any the owner and driver of the car transporting my of	aution in guarding the health of the above partigers, The State University of New Jersey, liability in case of illness or injury as a resu	nticipant and prevent U.S. Department of a lt of this activity. Fu	ting accidents, I Agriculture, and arthermore, I release	
Signature of parent or guard	lian:			
Medical Emergen	cy Authorization and Health	Information		
I authorize the event coordinator(s) to dispense the with the instructions provided on the label (preson an accident to the above named participant requivauthorize the 4-H chaperone(s) to take such action participant. This authority extends to any physical and/or surgical procedures including examination named participant. All efforts will be made to contain the contains the cont	cription drugs) or below (over-the-counter magnetization drugs) or below (over-the-counter magnetization as seems appropriate to protect the health cian(s) and/or surgeon(s) selected by the events and tests necessary to preserve the health	nedications). In case ne/she is a participan and physical well-b ent coordinator(s) to particular and physical well-b	of sudden illness or t in this activity, I eing of the above perform medical	
Name of parent/guardian Phone no	umber Name of additional emerg	gency contact Ph	none number	
The following information is provided as an aid participant has the following health conditions: (				
Health conditions:				
Medications/Instructions:				
Health Insurance: Company Group#	ID#			
Sign Here Signature of parent or guard	lian			

## **New Jersey 4-H Code of Conduct**

The primary purpose of the New Jersey 4-H Code of Conduct is to ensure the safety and well-being of all participants at 4-H sponsored events and activities. It applies to all participants, with participants defined as 4-H members, their parents, and volunteers.

As a participant in the 4-H program, I will:

- Conduct myself in a courteous manner and treat members, parents, 4-H volunteers, Extension staff, judges and others with respect. Appropriate language and behavior are expected at all times.
- Respect and adhere to the rules and guidelines of the 4-H program including all those specific to a 4-H event or activity.
- Uphold an individual's right to dignity by supporting an environment of inclusion which welcomes involvement of participants from all backgrounds.
- Accept supervision and support from county and state 4-H staff while participating in the 4-H program. This
  includes acceptance of supervision and support from appointed 4-H volunteers coordinating 4-H events and
  activities.
- Obey local, state and federal laws.

Participants who fail to adhere to the New Jersey 4-H Code of Conduct are subject to a range of disciplinary actions. Such actions will be taken in compliance with the New Jersey 4-H Discipline Policy and Procedure. When appropriate, immediate corrective action will be taken at the 4-H event to ensure the safety and welfare of all participants.

I understand if I fail to adhere to the above Code of Conduct, I will be subject to disciplinary action and potentially prohibited from attending and participating in the New Jersey 4-H Youth Development program.

Signature of participant in event	Date	
Signature of parent or guardian	Date	

## New Jersey 4-H Media Policy and Release

The 4-H program routinely promotes activities through various media. This includes, but is not limited to newsletters, newspapers, brochures, and displays. In doing so, the names and photos of members may be included to help tell the 4-H story. However, New Jersey 4-H policy is that on web sites, youth in photos will not be identified by name(s).

No, do not use my individual picture for any purpose. I will make an effort to avoid opportunities to be in group photos.
No, do not use my name for any purpose.