

WASHINGTON 4-H ENROLLMENT FORM

(Office Use Only)

County Code: 0
(0+2-digit-WA county number)

Group Code:
(3-digit club/group number)

Member Code:
(5-digit unique member/leader ID#)

(Leader fills in this section)

DATE: _____ GEN/ORG. LEADER: _____ PHONE: () _____

CLUB NAME: _____ MAILING ADDRESS: _____

Circle one: 1-Community Club 2-Sch. Club 3-After-Sch. Club 4-Military Club 5-Spec. Int./Short-Term
 6-Overnight Camp 7-Day Camp 8-Sch. Enrichment 9-Individual/Fam. 4-H 10-Sch. Age Care

PLEASE PRINT

Circle one: M-Member G-General/Org. Ldr. P-Project Ldr. A-Activity Ldr. R-Resource Ldr.

Circle one: N-New Enrollment R-Re-enrollment D-Drop from Club Ch-Change/Add Information

Youth Leader **Circle one or more:** Indirect Volunteer Direct Volunteer Middle Manager
(Members Only) (Youth Leaders or Adult Leaders Only)

Last Name: _____ First Name: _____ MI: _____

Mailing Address: _____

Zip + 4: - City: _____ State: _____

School (Opt.): _____ Yr. in 4-H: _____ Birthday: ____/____/____ Gender: M F

Grade: _____ (Yth. only) Disabled: Disability: _____ Accommodation Needed? Yes No

Residence: Farm Rural Urban Suburb Central City E-mail _____
(Under 10,000) (Under 50,000) (Over 50,000) (Over 50,000)

Ethnic: Hispanic Not Hispanic

Race: (Check all that apply) White Black Alaskan/Am.Indian Asian Hawaiian/Pac.Isl. Other

PROJECT CODE	PROJECT NAME	PROJECT YEAR
Example: FHB	Just Outside the Door	1
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Parent/Guardian: _____ Signature: _____

Home Ph: - Work: - Family E-mail _____

Leader Signature: _____ Date: _____

WASHINGTON STATE 4-H CODE OF CONDUCT

As a participant in the Washington State 4-H Program, you are expected to represent the best of our 4-H program to the public. Therefore, you are expected to conduct yourself in a manner that reflects well on your state, county, and club, as well as yourself.

1. Participants will demonstrate respect and courtesy to each other, all adults, their animals/projects. Please be considerate of others.
2. As a 4-H member you will do your best to attend all orientation meetings and class competitions, as instructed by your leader. Inform your leader if you are not feeling well.
3. Dress appropriately for public occasions. Research required attire for specific functions.
4. Language must be controlled and appropriate. Swearing is not considered appropriate.
5. Possession or the use of alcohol, drugs, or any controlled substance (other than prescribed medicine) is strictly PROHIBITED!.4-H members may not use tobacco products.
6. Avoid tampering or damaging buildings, other displays, equipment, etc. that may cause damage to the public, members, or leaders.

Exhibitors found in violation of rules or in practices unethical or inimical to the 4-H program shall be penalized by:

1. Forfeiture of all premiums, prizes, ribbons, awards, and/or privileges as deemed appropriate to the circumstances by the appropriate Leader of a specific event.
2. Elimination from participation at future 4-H activities.
3. Notification of parents and will be sent home.
4. Assessing the exhibitor’s parents or guardians the cost of damages, repairs, or restitution.
5. Releasing the exhibitor to the nearest law enforcement agency and/or proper authorities.
6. Notification of the exhibitor’s county extension staff person for consideration of further sanctions.

I have read the Code of Conduct and agree to abide by its rules. I understand that infractions of this code will result in any or all of the penalties listed above.

Member Signature

Parent/Guardian Signature

Date

Date

PHOTO SERVICES RELEASE

I hereby consent and agree that Washington State University, its employees or agents, have the right to take photographs, digital images, or video/film of me (and/or my property) and to use them for educational and promotional materials. I further consent that my name may be revealed therein or by descriptive text or commentary.

I hereby release Washington State University, its agents and employees all rights to exhibit this work publicly or privately, including postings to University web pages and to market and sell copies. I waive any rights, claims or interests I may have to control the use of my identity or likeness in the photographs, digital images, video, or film and agree that any uses described herein may be made without compensation.

_____ I AGREE

_____ I DO NOT AGREE to the above Photo Release Statement.

Member Signature

Parent/Guardian Signature

Date

Date