

**Sonoma County 4-H Camp  
2009 Chaperone Application**

**Fees: \$15.00 4-H Leaders  
\$23.00 Non 4-H Leaders**

Choose One: **CAMP I** \_\_\_\_\_ **CAMP II** \_\_\_\_\_ **Either** \_\_\_\_\_  
(Mon. June 28 to Sat. July 3) (Sun. July 4 to Fri. July 9)

*While we must maintain a ratio of one chaperone to ten youth at all times, we also welcome parents who can come to camp for less than the full week. You can stay for just the day, or plan to spend a few days and nights. Please indicate the exact days and times you are willing to share:*

**From** \_\_\_\_\_, \_\_\_\_\_ **to** \_\_\_\_\_, \_\_\_\_\_  
Day of the week and Date Time Day of the week and date Time

**Name** \_\_\_\_\_ **T-shirt size** \_\_\_\_\_

**Address** \_\_\_\_\_  
Street City Zip

**Phone** \_\_\_\_\_ **Cell** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Names of your children attending camp: Children must be five or older, and you must turn in a completed camp application for each child.**

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**Please check one:**

\_\_\_\_\_ **I am currently enrolled as a 4-H leader. Name of club:** \_\_\_\_\_

\_\_\_\_\_ **I am not currently enrolled but I was enrolled in a club last year, 2008-2009**

**Name of club:** \_\_\_\_\_

\_\_\_\_\_ **I am not currently enrolled but I was a camp chaperone last year.**

\_\_\_\_\_ **I was not enrolled as a leader or a camp chaperone in the 2008-09 club year.**

**Please note: If you *were* enrolled as either a leader or chaperone in 2008-09, you do not have to be Re-fingerprinted but you do need to re-enroll as a 4-H leader, either in a club or as a camp chaperone.**

**If you *were not* enrolled as a leader or camp chaperone in 2008-09, you will need to complete the 4-H Leader enrollment process. This includes fingerprinting which can take up to a month to be approved.**

**All necessary enrollment forms are available online at [www.ucanr.org/soco4h](http://www.ucanr.org/soco4h).**

**Mail completed applications to:**

**4-H Office, 133 Aviation Blvd. Santa Rosa, CA 95403**

*See Side Two*

## Thank you for volunteering to help at 4-H Camp!

We look forward to seeing experienced *chaperones* and welcoming new adults to the program. Those who have gone before you will tell you; you are in for one of the best times of your life! As you can see from the list of responsibilities, adults are busy at 4-H Camp, but we still have time for friendship and fun, plus the pleasure of watching teens and campers grow and mature, lead and problem-solve, learn from successes and mistakes, care for each other and come together as a community – all in six fabulous days. Welcome to all!

**While our camp program is run by the teen staff, your help is needed and welcomed in many areas.**

All adult volunteers are asked to chaperone a tribe group, led by a teen staff Tribe Leader and an assistant. You are there to help as needed: To assist in case of emergencies, to advise and encourage teen Tribe Leaders, to assist with behavior problems, to take part in tribe activities including campfire skits, Inspiration, special events, K.P. and camp clean-up.

All adult volunteers are also asked to accompany groups of campers and staff on education sessions. Sessions are one to two hours long and take place three mornings.

**Your help is also needed in these areas. Please check any activities you'd like to help with. Most jobs can be shared. You can try different jobs each day.**

\_\_\_ **Food Preparation:** Assist cooks as needed with prep work.

\_\_\_ **Meal Service:** Assist cooks with serving meals.

\_\_\_ **K.P. Supervisor:** Supervise Tribes assigned to set-up and clean up at meal times. Monitors use of commercial dish washer/sanitizer.

\_\_\_ **Hikes:** Accompany groups on scheduled hikes. (Two early morning, night hike, and star hike.)  
Be available for unscheduled free-time hikes.

\_\_\_ **Pool:** At least one adult must be present when the pool is open, to assist the lifeguard and teen staff to make sure everyone is safe.

\_\_\_ **Crafts:** Three or four adults to help campers with projects, pass out materials, keep supplies organized and clean up the area..

\_\_\_ **Maintenance:** Help with minor repair work to plumbing, equipment and facilities.

\_\_\_ **Trash Removal:** Take trash to bins at the front gate each evening.

\_\_\_ **Water System Monitor:** Uses a kit to check the safety of the water supply daily. Keeps a log. You will be trained at camp.

\_\_\_ **Chaperone / Camper Games:** Plan and lead activities for campers during a one hour period while the teen staff swims.

\_\_\_ **Bus Chaperone:** Accompany staffers or campers to and from camp on the bus.

\_\_\_ **Luggage Hauling:** Carry luggage to and from camp in a large truck or trailer. (Stock trailers work well.)



## University of California Division of Agriculture and Natural Resources 4-H Youth Development Program New Adult 4-H Volunteer Paper Application Form

The 4-H Youth Development Program is in every county in California. 4-H is a place where young people are given many opportunities to build confidence, learn responsibility, and develop skills that will last them a lifetime. It's a place where youth make friends and share interests, ranging from building robots to raising rabbits, from designing web pages to landscape design. It's a place where youth work together to make a positive difference in their community, and adult volunteers make a powerful difference in the lives of young people. Get involved in the 4-H community and make a lasting difference! For more information about 4-H, visit [www.ca4h.org](http://www.ca4h.org).

4-H Youth Development Program Volunteers are appointed by the County Director. The decision to appoint or not appoint a volunteer (whether initially or upon renewal) rests with the County Director, in consultation with appropriate 4-H staff. All appointments are made for the best interest of the 4-H Youth Development Program and 4-H members.

Adults are eligible to participate in 4-H if they are 18 years of age or older. A volunteer cannot simultaneously be a 4-H member. Chaperones must be 21 years of age or older (*county age requirement may differ*).

This application form is used for adults in all delivery modes in which the adult will have contact with youth.

### Step 1: REQUIRED FORMS, BACKGROUND CHECK, AND ORIENTATION

Required Annually	<b>Form:</b> Enrollment Form with signatures ( <i>kept on file at the County 4-H Office</i> )
Required Annually	<b>Form:</b> Waiver of Liability ( <i>kept on file at the County 4-H Office</i> )
Required Annually	<b>Form:</b> Medical Release and Health History ( <i>kept on file by the local 4-H Club/Unit Leader</i> )
Required Annually	<b>Form:</b> Volunteer Confidential Self-Disclosure Form ( <i>kept on file at the County 4-H Office</i> )
Required First Year	Complete the background screening process including a Live Scan or BID-7 Finger Print Form
Required First Year	Participate in a required 4-H volunteer orientation

### Step 2: PAYMENT - The following payment is required to enroll in the 4-H program.

*In some cases, these fees may be covered or waived by the 4-H Club/Unit or County 4-H Office.*

4-H Club/Unit Program Fees	\$	per adult
County 4-H Program Fees	\$2.00	per adult
State 4-H Accident/Sickness Insurance and Program Fees	\$6.00	per adult
<b>Total</b>	\$	

### Step 3: Return the forms and payment to the 4-H Club/Unit Leader or the County 4-H Office.

*Once all steps have been completed, the County 4-H Office must confirm your appointment.*

### For more information about 4-H Enrollment, please contact:

<p><b>4-H Club/Unit Leader</b></p> <p><i>[Enter contact information here.]</i></p>	<p><b>County 4-H Office</b></p> <p>University of California Cooperative Extension Sonoma County 4-H 133 Aviation Blvd. Suite 109 Santa Rosa, CA 95403 707-565-2681 <a href="http://www.ucanr.org/soco4h">www.ucanr.org/soco4h</a></p>
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In compliance with the California Information Practices Act of 1977, the following information is provided:

The information on this form is being requested by the University of California Cooperative Extension for use in its 4-H Youth Development Program. The individual completing this form may make inquiries concerning use of the information collected and may ask to review the form as well as other non-confidential personal information maintained on record by contacting the local UCCE County Director, 4-H Youth Development Advisor, 4-H Program Representative, or the State 4-H Director at:

California 4-H Youth Development Office  
University of California  
DANR Building, One Hopkins Road  
Davis, CA 95616-8575  
(530) 754-8518  
fourhstateofc@ucdavis.edu

Information on this form is being requested under the authority of the Smith-Lever Act of 1914 covering Cooperative Extension activities and Article IX, Section 9 of the State of California Constitution covering the University of California. Ethnic information is requested to maintain compliance with Title VI of the Civil Rights Act of 1964 and sex information is requested to maintain compliance with the Title IX of the Education Amendments of 1972.

Statistical information on this form is being collected to satisfy the U.S. Department of Agriculture Extension Service reporting requirements for Affirmative Action and the Federal ES-237 annual 4-H Youth Program Report. Statistical information includes birth date, sex, ethnic information, residence location, project name and number.

Submission of the above noted information is voluntary. If the information is not submitted by the source, the County 4-H Youth Development Staff may use his or her judgment to complete the information and satisfy Federal reporting requirements.

Other personal information on this form is being collected to provide the County Extension 4-H Advisors with information to assist in program planning. This information consists of name, address, phone, name of school, club/group name, club/group number, date, birth date, grade, and name of parent or guardian.

Submission of the above noted information is voluntary for membership in all organized 4-H Clubs and in some 4-H Groups and activities as designated by the County 4-H Youth Development Staff in charge. If the information is not submitted, the County 4-H Youth Development Staff may not contact and/or include the individual in 4-H programs within the county. In addition, the information must be on file in the county office as mandatory proof of enrollment for individuals in the above-mentioned clubs or groups, for purposes of 4-H accident insurance coverage.

The University of California prohibits discrimination or harassment of any person on the basis of race, color, national origin, religion, sex, gender identity, pregnancy (including childbirth, and medical conditions related to pregnancy or childbirth), physical or mental disability, medical condition (cancer-related or genetic characteristics), ancestry, marital status, age, sexual orientation, citizenship, or service in the uniformed services (as defined by the Uniformed Services Employment and Reemployment Rights Act of 1994: service in the uniformed services includes membership, application for membership, performance of service, application for service, or obligation for service in the uniformed services) in any of its programs or activities.

University policy also prohibits reprisal or retaliation against any person in any of its programs or activities for making a complaint of discrimination or sexual harassment or for using or participating in the investigation or resolution process of any such complaint.

University policy is intended to be consistent with the provisions of applicable State and Federal laws. Inquiries regarding the University's nondiscrimination policies may be directed to the Affirmative Action/Equal Opportunity Director, University of California, Agriculture and Natural Resources, 1111 Franklin Street, 6th Floor, Oakland, CA 94607, (510) 987-0096.



**University of California Agriculture and Natural Resources 4-H Youth Development Program  
New Adult 4-H Volunteer Paper Application Form**

<b>Email</b>		<b>County</b>	<b>Sonoma</b>
<b>First Name</b>		<b>Last Name</b>	
<b>Address</b>			
<b>City</b>		<b>State &amp; Zip Code</b>	
<b>Phone</b>		<b>Cell Phone</b>	
<b>Work Phone</b>		<b>Fax</b>	
<b>Birth Date</b>		<b>Year in 4-H</b>	
<b>Gender</b>	<input type="checkbox"/> male <input type="checkbox"/> female		
<b>Ethnicity</b>	Are you of Hispanic ethnicity? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> White <input type="checkbox"/> Black	<input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Prefer Not to State	
<b>Residence</b>	<input type="checkbox"/> Farm ( <i>Rural area where agricultural products are sold</i> ) <input type="checkbox"/> Town under 10,000 and rural non-farm <input type="checkbox"/> Town/City 10,000 – 50,000 and its suburbs	<input type="checkbox"/> Suburb of city more than 50,000 <input type="checkbox"/> Central city more than 50,000	
<b>Military</b>	<input type="checkbox"/> No one in my family is serving in the military <input type="checkbox"/> I have a parent serving in the military Branch: <input type="checkbox"/> Air Force <input type="checkbox"/> Army <input type="checkbox"/> Coast Guard <input type="checkbox"/> Marines <input type="checkbox"/> Navy      Component: <input type="checkbox"/> Active Duty <input type="checkbox"/> National Guard		
<b>Education</b>	<input type="checkbox"/> Decline to State <input type="checkbox"/> Less than 9 <sup>th</sup> grade <input type="checkbox"/> 9 <sup>th</sup> to 12 <sup>th</sup> grade, no completion <input type="checkbox"/> High school completion <input type="checkbox"/> Some college (no degree)	<input type="checkbox"/> Associate Degree <input type="checkbox"/> Bachelor Degree <input type="checkbox"/> Master Degree <input type="checkbox"/> Professional Degree <input type="checkbox"/> Doctorate Degree	
<i>Please indicate proficiency in a language, other than English.</i>			
<i>If you have children in the 4-H program, please list their names.</i>			
For 4-H Alumni – County & State Last year you were enrolled in 4-H			
County Newsletter Preference: <input type="checkbox"/> Postal mail <input type="checkbox"/> Email		<input type="checkbox"/> Sign-Up for State Electronic Newsletter	

<b>Club/Unit Name</b>	<b>Leadership Role</b>		
	<input type="checkbox"/> Primary Community Leader <input type="checkbox"/> Co-Community Leader <input type="checkbox"/> Other Club Leader <input type="checkbox"/> Assistant Community Leader <input type="checkbox"/> Enrollment Coordinator		
<b>Club/Unit Name</b>	<b>Project Name</b>	<b>Years in Project</b>	<b>Leadership</b>
			<input type="checkbox"/> Project Leader <input type="checkbox"/> Ass't Project Leader <input type="checkbox"/> Project Specialist (Resource Leader)
			<input type="checkbox"/> Project Leader <input type="checkbox"/> Ass't Project Leader <input type="checkbox"/> Project Specialist (Resource Leader)

By signing and dating this document, I certify that I have read, understand, and agree to the terms of the 4-H Code of Conduct/Responsibilities and Rights and Photograph and Information Release. I am aware that I must re-apply for a 4-H Volunteer appointment annually, and provide an updated Medical Release, Waiver of Liability, and Volunteer Confidential Self-Disclosure Form.

<b>Signature</b>	<b>Date</b>
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<b>County Use Only</b>					<b>Club Use Only</b>		
Volunteer ID#	Waiver of Liability	Background Check	Self-Disclosure	Orientation	Date Received	Medical Release	CASH OR CHECK# _____ Fees Paid \$ _____

**University of California Division of Agriculture and Natural Resources  
4-H Youth Development Program**

Participant's Name \_\_\_\_\_  
Please Print

County \_\_\_\_\_ **Sonoma** \_\_\_\_\_ Club/Unit \_\_\_\_\_

WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

**Waiver:** In consideration of being permitted to participate in any way in *California 4-H Youth Development Activities and Projects*, I, for myself, my heirs, personal representatives or assigns, **do hereby release, waive, discharge, and covenant not to sue** The Regents of the University of California, its officers, employees, and agents from liability **from any and all claims including the negligence of The Regents of the University of California, its officers, employees and agents**, resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in *California 4-H Youth Development Activities and Projects*.

**Assumption of Risks:** Participation in *California 4-H Youth Development Activities and Projects* carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains; 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions; and 3) catastrophic injuries including paralysis and death.

**I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in *California 4-H Youth Development Activities and Projects*. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.**

**Indemnification and Hold Harmless:** I also agree to INDEMNIFY AND HOLD The Regents of the University of California HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in *California 4-H Youth Development Activities and Projects*, and to reimburse them for any such expenses incurred.

**Severability:** The undersigned further expressly agrees that the foregoing Waiver and Assumption of Risk Agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

**Acknowledgment of Understanding:** I have read this Waiver of Liability, Assumption of Risk, and Indemnity Agreement, fully understand its terms, and **understand that I am giving up substantial rights, including my right to sue**. I acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

\_\_\_\_\_  
Signature of Parent/Guardian of Minor or Adult Participant

\_\_\_\_\_  
Date

Age (if minor) \_\_\_\_\_

THIS WAIVER APPLIES TO ALL CALIFORNIA 4-H YOUTH DEVELOPMENT ACTIVITIES AND PROJECTS INCLUDING, BUT NOT LIMITED TO PROJECT MEETINGS, CLUB MEETINGS, EDUCATIONAL FIELD DAYS, FIELD TRIPS, CAMPS, EXCHANGE PROGRAMS, FUNDRAISERS, COMMUNITY SERVICE ACTIVITIES, VOLUNTEER TRAININGS, FAIRS, AND PROJECTS.

***LIST OF CALIFORNIA 4-H PROJECTS***

<b>Civic Engagement</b>	<b>Animals</b>	<b>Environmental Education and Earth Sciences</b>
Citizenship	Alpacas	4-H Camping (Overnight)
Domestic Exchanges	Animal Husbandry	Astronomy
Economics & Marketing	Bees	Climatology
Global Education	Birds	Environmental Stewardship
International Exchanges	Birds - Emu & Ostrich	Fishing and Fly Tying
Service Learning	Birds - Exotic	Forestry
Community Pride & Community Service	Birds - Poultry	Oceanography
	Birds - Turkey	Outdoor Adventure
<b>Communications and Expressive Arts</b>	Cats	Science Literacy
Arts & Crafts	Cattle	Soil & Water Conservation
Calligraphy	Cattle - Beef	Wildlife
Ceramics & Clay Arts	Cattle - Dairy	
Communications	Cavies	<b>Physical Sciences</b>
Cultural Arts	Dog	Energy Management
Dance	Goats	Geology
Drama & Theater Arts	Goats Angora	
Graphic Arts	Goats Dairy	<b>Plant Science</b>
Hobbies	Goats Meat	Field Crops and Management
Leathercraft	Goats Nigerian	Fruits, Nuts and Berries
Music & Instruments	Goats Pack	Indoor and Mini Gardens
Photography	Goats Pygmy	Junior Master Gardener
Public Speaking	Guide Dogs and Service Animals	Ornamental Horticulture
Scrapbooking	Equine - Horse & Ponies	Sugarbeets
Sign Language	Livestock Judging	Vegetable Gardens and Crops
Leadership and Personal Development	Llamas	
All Star Leadership	Pets and Small Animals	<b>Technology and Engineering</b>
Beginning 4-H	Rabbits	Aerospace & Rocketry
Career Exploration	Reptiles	ATV & Dirt Biking
Group-Determined	Sheep	Automotive
Hi 4-H	Sheep Breeding	Bicycles
Leadership Development	Sheep Market	Website Design
Primary Members (Mini Member & Cloverbud)	Swine	Computers & Internet
Record Keeping	Swine Breeding	Construction & Building
Self-Determined	Swine Market	Electricity & Electronics
	Therapeutic Animals	Farm Machinery
<b>Health</b>	Biological Sciences	General Engineering
Baking and Breadmaking	Embryology	GIS/GPS
Cake Decorating	Entomology	Metal Working
Foods	Marine Biology	Robotics
Foods - Beginning	Veterinary Science	Shooting Sports - Archery
Foods - Dairy	Zoology	Shooting Sports - Hunting
Foods - International		Shooting Sports - Muzzle Loading
Foods - Nutrition	<b>Consumer and Family Sciences</b>	Shooting Sports - Pistol
Foods - Preservation	Child Development and Care	Shooting Sports - Rifle
Health and Physical Fitness	Clothing & Textiles	Shooting Sports - Shotgun
Sports	Consumer Education	Small Engines
	Fashion Revue	Video Production
<b>Personal Safety</b>	Fiber Arts	Woodworking
CPR & First Aid	Flower Arranging	
Emergency Preparation & Management	Home & Personal Management	
Safety	Home Arts & Furnishings	
	Quilting	
	Table Setting	

**University of California Division of Agriculture and Natural Resources  
4-H Youth Development Program  
Volunteer Confidential Self-Disclosure Form**

Name of 4-H Club/Unit	First Name	Last Name
Mailing Address	City	State
		Zip

The purpose for requesting the information on this form is to provide a safe environment for young people involved with 4-H activities. **Furnishing all information requested on this form is mandatory. Failure to provide this information will delay or prevent appointment as a 4-H Volunteer.** Local programs may also require additional information before appointing 4-H volunteers. University of California policy authorizes maintenance of this information. Individuals have the right to review their own records in accordance with the Division of Agriculture and Natural Resources Administrative Handbook, Section 402. Information on these policies may be obtained from the Controller and Business Services Director, Agriculture and Natural Resources, University of California, 1111 Franklin Street, 6<sup>th</sup> Floor, Oakland, CA 94607-5200, or via the Internet at: <http://danr.ucop.edu>. The official responsible for maintaining the information contained on this form is the Cooperative Extension County Director.

1. Have you been convicted of a felony in the last ten years?  Yes  No
2. Has anyone living with you been convicted of a felony in the last ten years?  Yes  No
3. Have you ever been convicted of child abuse, neglect, or any sex offense?  Yes  No
4. Has anyone living with you ever been convicted of child abuse, neglect, or any sex offense?  Yes  No
5. Has your driver's license been suspended or revoked in the last ten years?  Yes  No
6. Are there any other facts or circumstances involving your background or background of others in your household that would call into question your being entrusted with the supervision, guidance, and care of young people?  Yes  No
7. Do you have a valid driver's license? State \_\_\_\_\_  Yes  No
8. University of California (UC) requires volunteers to maintain minimum automobile liability coverage of \$50,000 per accident claim/\$100,000 in aggregate/ \$50,000 for property damage. Do you have this level of coverage?  Yes  No  
If no, what is your coverage? \_\_\_\_\_ per accident, \_\_\_\_\_ in aggregate, \_\_\_\_\_ property damage?
9. I understand that UC provides secondary liability coverage in the event of an accident during 4-H business and if my coverage is below the UC minimums, I am liable for the difference between my policy limits and UC's secondary coverage. \_\_\_\_\_ initial
10. If you answered "Yes" to questions 1-6, or "No" to 7 or 8, please explain:

By signing below, I certify that the information above and on my application is true and correct. In addition, I have read, understand and agree to the terms of the 4-H Code of Conduct/Responsibilities and Rights and Photograph and Information Release. I am aware that I must re-apply for a 4-H Volunteer appointment annually, and provide an updated Adult Medical Release Form, Waiver of Liability, and Volunteer Confidential Self-Disclosure Form. I also understand that this application must be approved and my fingerprints cleared through the Department of Justice before my service as a volunteer begins. Volunteer appointments are for a period of one year.

Applicant Signature	Date
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**Instruction to the Applicant:** Place this application in a "confidential" envelope and sign along the seal. The sealed envelope must be forwarded to the County Cooperative Extension/4-H Office.



The University of California prohibits discrimination or harassment of any person on the basis of race, color, national origin, religion, sex, gender identity, pregnancy (including childbirth, and medical conditions related to pregnancy or childbirth), physical or mental disability, medical condition (cancer-related or genetic characteristics), ancestry, marital status, age, sexual orientation, citizenship, or service in the uniformed services (as defined by the Uniformed Services Employment and Reemployment Rights Act of 1994: service in the uniformed services includes membership, application for membership, performance of service, application for service, or obligation for service in the uniformed services) in any of its programs or activities. University policy also prohibits reprisal or retaliation against any person in any of its programs or activities for making a complaint of discrimination or sexual harassment or for using or participating in the investigation or resolution process of any such complaint. University policy is intended to be consistent with the provisions of applicable State and Federal laws. Inquiries regarding the University's nondiscrimination policies may be directed to the Affirmative Action/Equal Opportunity Director, University of California, Agriculture and Natural Resources, 1111 Franklin Street, 6th Floor, Oakland, CA 94607, (510) 987-0096.

University of California Division of Agriculture and Natural Resources

4-H Youth Development Program

Adult Medical Release Form

This Medical Release Form is authorized for all 4-H Youth Development meetings and activities during the dates specified below:

\_\_\_\_\_  
First Name Last Name Club/Unit Name  
\_\_\_\_\_  
Sonoma County, CA \_\_\_\_\_ to \_\_\_\_\_  
County and State Dates (From / To)

While I am attending or traveling to or from this 4-H function, I HEREBY AUTHORIZE THE ADULT 4-H LEADER OR 4-H STAFF MEMBER, or in his/her absence or disability, any adult accompanying or assisting him/her, TO CONSENT TO THE FOLLOWING MEDICAL TREATMENT FOR ME SHOULD I BE UNABLE TO MAKE A DECISION:

Any x-ray examination, anesthetic, medical or surgical diagnosis or treatment, and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and/or surgeon licensed under the provisions of the Medical Practices Act, California Business and Professions Code Section 2000 et seq.; or any x-ray examination, anesthetic, dental or surgical diagnosis or treatment, and hospital care to be rendered by a dentist licensed under the provisions of the Dental Practices Act, California Business and Professions Code Section 1600 et seq.

This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California. This authorization shall remain effective until I complete my activities in this program unless sooner revoked in writing. I understand that I will be responsible for the cost of any service or treatment provided not covered by the 4-H Accident/Sickness Insurance Program sponsored by UC Cooperative Extension.

EMERGENCY CONTACT INFORMATION

\_\_\_\_\_  
Name Relationship to Adult Identified Above  
(\_\_\_\_\_) (\_\_\_\_\_) \_\_\_\_\_  
Emergency Day Phone (with area code) Emergency Night Phone (with area code)  
\_\_\_\_\_  
Mailing Address City State Zip

AUTHORIZATION AND CONSENT AND RELEASE

I hereby certify that I am in good health and can travel to and participate in all functions of the 4-H Youth Development Program as described above. I understand it is my responsibility to keep the information on this form updated (including Health History) by contacting the State 4-H Office.

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

NON-CONSENT

I do not desire to sign this authorization and understand that this will prohibit me from receiving any non-life threatening medical attention in the event of illness or accident.

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

University policy and the State of California Information Practices Act of 1977 require the following information be provided when collecting personal information from you: The information entered on this form is collected under authority of the Smith-Lever Act. Submission of the medical data is voluntary. However, a signature is required on one or the other of the two signature lines above. Failure to provide the medical information and authorization may result in our inability to provide necessary medical treatment. You have the right to review University records containing personal information about you, with certain exceptions as set forth in policy and statute. Copies of University policies pertaining to the collection, use, or release of personal data are available for your examination from the local UCCE County Director, 4-H Youth Development Advisor, 4-H Program Representative or the State 4-H Director of the California 4-H Youth Development Program, University of California, DANR Building, One Hopkins Road, Davis, CA 95616-8575, (530) 754-8518. Only your own records are open to your review.

Any known or foreseeable intergovernmental transfer that may be made of the information is as follows: None.  
New Adult 4-H Volunteer Paper Application Form Revised 4/16/2009

**University of California Division of Agriculture and Natural Resources  
4-H Youth Development Program  
Health History Information**

First Name _____	Last Name _____	Sonoma County	_____/_____/_____ Date of Birth
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Subject to:	YES	No	Now Have or Have Had	Yes	No
Colds			Heart Trouble		
Sore Throat			Asthma		
Fainting Spells			Lung Trouble		
Bronchitis			Sinus Trouble		
Convulsions			Hernia (rupture)		
Cramps			Appendicitis		
Allergies			Has appendix been removed?		
Wear corrective lenses?			Do you walk in your sleep?		
Is hearing good?					

Date of last Tetanus Vaccination: \_\_\_\_\_

Please identify allergies including allergies to food, medications, and drug reactions:

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Please list any disability accommodations you will need in order to participate in this program or activity.

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Please list all current medications:

Name of Medication	Dosage	Times Taken

Please include any additional remarks and special instructions to better assist emergency service personnel.

Please explain "yes" answers on this page.

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The University of California prohibits discrimination or harassment of any person on the basis of race, color, national origin, religion, sex, gender identity, pregnancy (including childbirth, and medical conditions related to pregnancy or childbirth), physical or mental disability, medical condition (cancer-related or genetic characteristics), ancestry, marital status, age, sexual orientation, citizenship, or service in the uniformed services (as defined by the Uniformed Services Employment and Reemployment Rights Act of 1994: service in the uniformed services includes membership, application for membership, performance of service, application for service, or obligation for service in the uniformed services) in any of its programs or activities. University policy also prohibits reprisal or retaliation against any person in any of its programs or activities for making a complaint of discrimination or sexual harassment or for using or participating in the investigation or resolution process of any such complaint. University policy is intended to be consistent with the provisions of applicable State and Federal laws. Inquiries regarding the University's nondiscrimination policies may be directed to the Affirmative Action/Equal Opportunity Director, University of California, Agriculture and Natural Resources, 1111 Franklin Street, 6th Floor, Oakland, CA 94607, (510) 987-0096.

**4-H 1110 (Rev 9/2008)**

# California 4-H Youth Development Program

## Code of Conduct/Responsibilities and Rights

The following guidelines are to assist 4-H Volunteers in understanding what behavior is expected while performing within the course and scope of a 4-H Volunteer. 4-H Volunteers are considered Agents of the University of California and must abide by all UC policies. Appointments of 4-H Volunteers may be renewed on an annual basis through County Offices.

*To be appointed as a 4-H Volunteer, an adult must:*

1. Be at least 18 years of age.
2. Complete a New Adult Volunteer Application Form.
3. Complete the 4-H Volunteer screening process including a Live Scan or BID-7 Applicant Finger Print Form.
4. Attend 4-H Volunteer orientation meeting(s) offered by the County 4-H Youth Development Staff.
5. Participate in required Volunteer trainings and activities.

### CODE OF CONDUCT

Upon receiving a 4-H Volunteer Appointment Card signed by the County Director, all 4-H Volunteers shall act in ways that promote positive youth development and are not in conflict with its policies and procedures. The following are prohibited when acting on behalf of the 4-H program:

1. Possession or use of alcohol, tobacco, and/or illegal drugs (or be under the influence thereof) when involved in a 4-H event or activity.
2. Use of abusive, obscene, and discriminatory language at any 4-H activity or event.
3. Direct personal attack or harassment (visual, verbal, or physical) on another person.
4. Behavior that is illegal, unsafe, or contrary to the highest standards of ethics.
5. Be the subject of a criminal investigation or prosecution for a misdemeanor or felony offense.

### RESPONSIBILITIES

1. Participate in and support, when practicable, local Volunteer Management Organizations and/or Leaders' Councils.
2. Recognize the responsibilities of the 4-H Youth Development Program Staff in setting program standards, priorities, and direction.
3. Be committed to the core values, educational goals, and standards of the 4-H Youth Development Program as established at various organizational levels.
4. Respect and safeguard the individual rights, competencies, safety, and property of program participants.
5. Prohibit discrimination of any policies, procedures, or practices on the basis of race, color, national origin, religion, sex, gender identity, pregnancy, physical or mental disability, medical condition (cancer-related or genetic characteristics), ancestry, marital status, age, sexual orientation, citizenship, or status as a covered veteran.
6. When transporting 4-H members or 4-H Volunteers, possess a valid driver's license, carry proof of automobile liability insurance, and ensure all passengers use seat belts.
7. Provide receipts for any money collected in the name of 4-H.
8. Adhere to and help enforce the program policies and procedures referred to in the 4-H Policy Handbook.

### RIGHTS

1. To be respected by program administrators and staff for the contribution 4-H Volunteers make to the program.
2. To have access to current program materials, training, and curriculum to support program delivery.
3. To actively participate in communications and meetings concerning the administration and delivery of the program.
4. To be informed of any administrative action that could result in disciplinary actions or expulsion from the program.
5. To make written complaints concerning Cooperative Extension programs, policies, or personnel as described in the 4-H Policy Handbook, Section 313.
6. To be immune from liability when reporting suspected child abuse, unless it can be proven that a false report was filed and the 4-H Volunteer knew it was false.

### PENALTIES FOR INFRACTIONS

Infractions of the Code of Conduct or the 4-H Volunteer Responsibilities and Rights must be reported by anyone observing them to the 4-H Youth Development Staff and/or Cooperative Extension County Director. Penalties include:

1. Discussion of inappropriate actions with the 4-H Volunteer, and clarification of policy when appropriate.
2. Releasing the adult to the appropriate law enforcement agency, if appropriate.
3. Written notice of termination of 4-H Volunteer status, and removal from the 4-H Youth Development Program.
4. Volunteer status suspension while charges are under investigation.

By my signature on the 4-H New Adult Volunteer Application Form, I acknowledge receipt of this document and acknowledge that I have read and agree to abide by the guidelines in this document. I understand that my appointment as a 4-H Volunteer is contingent upon my agreement to this document. Failure to comply with these guidelines may result in termination as a 4-H Volunteer.

## Photograph and Information Release

I give to The Regents of the University of California, National 4-H Council, National 4-H Headquarters (USDA), Cooperative Extension and units, its nominees, agents, and assigns, unlimited permission to copyright and use, publish, and republish for purposes of advertising, public relations, trade, or any other lawful use, information about me and reproduction of my likeness (photographic or otherwise) and my voice, whether or not related to any affiliation with 4-H, with or without my name. I hereby waive any right that I (and minor) may have to inspect or approve the copy and/or finished product or products that may be used in connection therewith or the use to which it may be applied. By signature on the 4-H New Adult Volunteer Application Form, I consent and agree to the foregoing terms and provisions.

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# University of California Division of Agriculture and Natural Resources 4-H Youth Development Program

UNIVERSITY OF CALIFORNIA



CITIZENSHIP

LEADERSHIP

LIFE SKILLS

# 4-H

## Youth DEVELOPMENT PROGRAM

The 4-H Youth Development Program (4-H YDP) provides a wide variety of enrichment activities with the ultimate goal of engaging youth in reaching their fullest potential while advancing the field of youth development. The focus of all programs is the development of citizenship, leadership, and life skills through a variety of projects and activities. 4-H is available through several different delivery methods including clubs, special interest, day camps, overnight camping, school enrichment programs, school-age child care programs, and individual study.

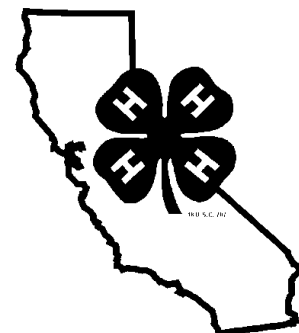
The purpose of 4-H YDP is to help young people discover and develop their potential in partnership with a caring adult. 4-H encourages young people to set their own goals and make their own plans and decisions. This helps boys and girls mature and build self-confidence. By being part of a group, 4-H members learn to understand and cooperate with others.

### The core values of the California 4-H Youth Development Program:

- Support the University of California Division of Agriculture and Natural Resources' mission and strategic planning assumptions.
- Recognize that 4-H Youth Development staff provides the youth development framework for volunteers and other cooperators who bring the knowledge, experience, and passion to work with youth in their communities.
- Appreciate, respect, and value diversity through a commitment to inclusion of diverse Californians.
- Respond to local needs within a context of statewide criteria, practices, and priorities for 4-H programming.
- Innovate to maximize impact and resources while documenting the unique youth development contributions of our 4-H Youth Development programs.

### The goals of the 4-H YDP are to help young people:

- Develop citizenship, leadership, and life skills.
- Develop initiative and assume responsibility.
- Develop the ability to live and work cooperatively with others.
- Acquire knowledge and skills and explore careers.
- Achieve satisfaction from work and accomplishments.
- Develop a positive self-image.



***Learn by doing in an atmosphere where learning is fun*** is a basic philosophy of the 4-H YDP. The project is where learn-by-doing or the experiential education model takes place.

Within the project, members find things to learn, to do, to make, to explore, and then receive feedback. A 4-H project is:

- Planned work in an area of interest to the 4-H member.
- Guided by a 4-H adult volunteer who is the project leader.
- Aimed at planned objectives that can be attained and measured.
- Summarized by some form of record keeping.

Each year, a 4-H member enrolls in at least one project. Members enrolling for the first time should be encouraged to take on only one project. As members gain experience, the size of the project may be increased or additional projects may be selected. With their project leader and parent/guardian as consultants, members should select a project that will be a challenge, but not one that is larger than they can handle. Any project a 4-H member selects should be based on:

- Interests, needs, and time available.
- Family situation.
- Suitability to area of residence.
- Availability of necessary tools and equipment.

For more information, please visit <http://www.ca4h.org/>

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