Cornell University
Cooperative Extension
Cortland County

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RE-ENROLLMENT FORM: OCTOBER 1, 2020-SEPTEMBER 30, 2021

FIRST NAME:_____ **MI:**_____ **LAST NAME:**_____

ADDRESS:_____ **CITY/TOWN:**_____

STATE:_____ **ZIP:**_____ **COUNTY RESIDENCE:**_____

PRIMARY TELEPHONE:_____ **EMERGENCY/CELL**_____

FAMILY EMAIL:_____ **YOUTH EMAIL:**_____

BIRTHDATE:_____ **GENDER:**_____ **GRADE:**____ **SCHOOL:**_____

4-H CLUB:_____

Part 1 – Youth Code of Conduct: 4-H members participating in or attending club, county, regional, district, state and national program, activities, events, shows and contests sponsored for youth by the 4-H Youth Development Program of Cornell Cooperative Extension of Cortland County are required to conduct themselves according in the following **Code of Conduct.**

The following ARE NOT PERMITTED at 4-H sponsored programs, activities, or events:

- Clothing: printed with:
  *Advertisement for tobacco or alcohol
  *Inappropriate, lewd or suggestive messages
- Revealing Clothing such as (but not limited to)
  *inappropriately short skirts or shorts
- Revealing including midriff-baring tops/ pants worn to show underwear
- Possession, consumption or distribution of alcohol
- Possession, use or distribution of illegal drugs
- Possession or use of all tobacco products
- Sexual activity
- Boys in girls' dormitory or lodging areas and girls in boys' dormitory or lodging areas
- Cheating or misrepresenting project work
- Theft, destruction, or abuse of property
- Violation of an established curfew
- Unauthorized absence from program site
- Physical verbal, emotional or mental abuse of another person
- Possession or use of a harmful object with the intent to hurt or intimidate others
- Other conduct deemed inappropriate for the youth development program by Cornell Cooperative Extension of Cortland County staff or a 4-H volunteer leader.

ENROLLMENT FEES:
(Oct.1-Dec.31, 2020
In-County:
5.00/max. $25.00 Family
Out of County:
$15.00/Max $30.00 Family
After Dec. 31, 2019:

Late Fee Enrollment:
In-County:
$15.00 per member
Out of County:
$25.00 per member

If this code is violated the following steps may be taken:

- The adult chaperone for the youth involved in the violation (CCE staff or 4-H leader) will be made aware of the situation.
- The parent(s) may be called and arrangements made for transportation home of the parent's expense.
- The 4-H'er may be barred from participating in 4-H
- When a violation occurs at the competitive event, 4-H members may be disqualified from the contest and may be ineligible for any awards. Competition in late contest may also be barred.
- If any laws are violated, the case may be referred to the police.

Part 1: Photo Release: 2020-2021 By signing the reverse side of this form, I consent and give permission to all Cornell Cooperative Extension the unlimited use of photos, videos, direct quotes, and/or audio clips that they have of me participating in Cornell Cooperative extension programs and events. I agree to give up my rights with regards to Cornell Cooperative extension understand and agree to the above request and conditions.

Part 3: ACKNOWLEDGEMENT OF RISK: 2020-2021 This form must be completed to participate **(including CLOVERBUDS)** in 4-H clubs and relative activities. I hereby apply for my child to participate in the 4-H club/or activity indicated below to be conducted by the designated Cornell Cooperative Extension Association and ***acknowledge as follows:*** I fully understand and acknowledge that there are inherent risks and dangers in my child's participation for the 4-h club and activities and my child's participate in said 4-H club and all its activities and use of any equipment related to such activities may result in injury, illness or death and damage to personal property.

I understand other participants, accidents, forces of nature or other causes may cause these risk and dangers and I hereby accept these risk and dangers. My child is in good health and and is at or above the **minimum age of 5 for Cloverbud members and age 8 for regular 4-H members** required to participate in this activity and is able to participate in any strenuous physical activity associated therewith.

CORNELL COOPERATIVE EXTENSION OF CORTLAND COUNTY
4-H PROGRAM YEAR: OCTOBER 1, 2020-SEPTEMBER 30, 2021

4-H Club Activity:

- ☐ All 4-H activities & events for program year
- ☐ Working with dogs
- ☐ Physical Fitness programs
- ☐ Shooting Sports

For Cloverbuds:

- ☐ Cloverbud activities
- ☐ Cloverbud working with equine or other animal programs

4-H Equine (Horse) Activities:

- ☐ Participating in an equine club
- ☐ Working with equines beyond club level including clinics, camps shows
- ☐ Works with equines in mounted "over fences" activities at Cornell University cooperative Extension Cortland County, multiple county, regional or state sponsored events. I give my child permission to participate in fences classes and obstacles (this does include trail class) The obstacles will not highter that 3 foot in any of the 4-H activities.

I have read the above and by signing it I agree it is my intention to have my child particpate in the indicated activity and I understand and accept the risks invloved.

This shall be binding on my heris, successors, assigns, administrators and executors. Any claims or disputes aring out of my child's participation in the activity shall be venued in the Supreme Court of the State of New York of the County where the County Extension office is located. I am at lease (21) twenty-one years of age and I am the legal parent/guardian authroized to sign this document on behalf of the child named herein.

Part 4: SIGNATURES;

Youth Name:	Parent Name:

4-H Club or Independent Member:

Parent/Guardian Signature:

TO RECEIVE ALL INFORMATION – POSTED BY THE 4-H OFFICE
Website: http://cortland.cce.cornell.edu/

- ☐ NEWSLETTERS: BY MAIL
- ☐ EMAIL / 4-H BLAST
- ☐ BOTH

2020-2021 Cornell Cooperative Extension is an employer and educator recognized for valuing AA/EEO. Protected Veterans, and Individuals with Disabilities and provides equal program and employment opportunities.

CORNELL COOPERATIVE EXTENSION - Volunteers and Program Participants

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19 The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization**. COVID-19 is extremely contagious** and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people of more than 50. The City of Cortland has set this number to 25.

Acknowledgement of Risk

I understand Cornell Cooperative Extension of Cortland County ("CCE") has put in place preventative measures to reduce the spread of COVID-19; however, **CCE cannot guarantee** that I or my dependent will not become infected with COVID-19. Further, **entering the facilities of, or participating in programs of, CCE could increase my risk of contracting COVID-19**.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19.
By participating in **CCE** programs and that such exposure or infection may result in personal injury, illness, permanent disability, or death. I understand that the risk of becoming exposed to or infected by COVID-19 diseases may result from the actions, omissions, of myself and others, including, but not limited to, **CCE** employees, volunteers, other participants, visitors or vendors.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I may experience or incur in connection with my entering **CCE** or participation in **CCE** programming ("Claims"). On my behalf, and on behalf heirs and estate, I hereby release, covenant not to sue, discharge, and hold harmless **CCE**, its directors, officers, employees, volunteers, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, or omissions of the **CCE**, its directors, officers, employees, volunteers, agents, and representatives, whether a COVID-19 infection occurs before, during, or after my participation.

And in addition: As a volunteer, program participant or the guardian of a program participant under the age of 18, by signing the attached, I acknowledge that I have reviewed the plan for Cornell Cooperative Extension of Cortland County. I will abide by the guidelines and continued updates as released by NYS Forward and the CDC.

Name(s):

Date:

Signature: