



University of Vermont Extension
4-H Enrollment Form for New Member

Print in ink, complete both sides,
and return to your designated UVM Extension Office



Photo Permission yes no Risk & Release yes no Medical Form yes no
Horse Helmet Form yes no Code of Conduct

I, _____ (nickname _____), wish to be in the 4-H Program.

Mailing Address _____ City _____ State _____ Zip code _____ - _____

Phone _____ Member E-mail address _____

Member Cell Phone Number _____ Have you been in 4-H before? _____ If yes, how many years? _____

Date you joined 4-H _____

Male Female Date of Birth _____ Grade in school _____ Age _____ Cloverbud (age 5, 6, 7) OR Member (age 8 and up)

I live on a farm I live in a town under 10,000 I live in a city (10,000-50,000)

Race (check all that apply): White Black or African American (only) American Indian or Alaska Native
Asian (only) Native Hawaiian or Other Pacific Island (only) White and Black
White and American Indian or Alaskan Native Black and American Indian or Alaskan Native
White and Asian Balanced (other combination)

Ethnicity (check one): Hispanic or Latino Not Hispanic or Latino

Is either parent in the military? yes no If yes, which branch? Army Navy Air Force Marines Coast Guard

What component? Active Reserve Guard

The name/s of my 4-H Club/s: #1 _____

#2 _____

and it is a (select one): community club after-school program club in-school program club military club

Club is located in what county _____

Leader Name (s) _____

Table with 6 columns: 4-H Projects, Project Name, Code, Youth Leader, Year in Project (Cloverbud =0), Club. Includes rows for Yes/No entries.

Parent/Guardian #1:

Name _____ Father Mother Other (specify) _____

Home Phone _____ Cell Phone _____ Work Phone _____

Street _____ City _____ State _____ Zip code _____ - _____

E-mail address _____

Parent/Guardian #2:

Name _____ Father Mother Other (specify) _____

Home Phone _____ Cell Phone _____ Work Phone _____

Street _____ City _____ State _____ Zip code _____ - _____

E-mail address _____

Needs or accommodations _____



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4-H Club Program Risk and Release

I give permission for _____ to be in the 4-H program. I understand that 4-H club project activities/events may involve certain risks of physical activity and that the University of Vermont and its 4-H program will provide each participant with due care, but that the University of Vermont cannot insure that my child will remain free of injury. I nonetheless wish to have my child participate as a Vermont 4-H club member in the 4-H club program. I agree to indemnify and hold harmless the University of Vermont and State Agricultural College, and UVM Extension and their trustees, employees and agents from any and all losses, penalties, damages, settlements, costs or other expenses or liabilities arising out of the 4-H program. This release, however, is not intended to release the University of Vermont from causes of action arising out of the sole negligence of the University of Vermont, its trustees, employees or agents.



Parent/Guardian's name (print) _____

Parent/Guardian's signature _____ Date _____

University of Vermont Extension
Vermont 4-H Code of Conduct

All 4-H members participating in or attending club, county, regional, state, and national programs, activities, events, shows, and contests sponsored by University of Vermont Extension, or representing 4-H at non-4-H events, are required to conduct themselves according to the Vermont 4-H Code of Conduct.

- As a Vermont 4-H member,
I will be worthy of trust, honor, and confidence.
I will respect all people including myself.
I will be responsible, accountable, and self-disciplined in the pursuit of excellence.
I will be just, fair, and open.
I will be caring in my relations with others.
I am aware that my actions and decisions affect others,
and I will be a contributing and law-abiding citizen.

My parent/guardian and I have read and discussed the Code of Conduct. We agree that I will conduct myself in accordance with the Code; failure to do so may result in a warning of or actual dismissal from the program, notice of which will be given to the parent/guardian in writing.



Parent/Guardian Signature _____

4-H Member Signature _____

Date _____

Photo Permission

The University of Vermont Extension 4-H Program may use my child's image in print, electronic, and/or video format for publishing in promotional material. I release all claims against the University with respect to copyright ownership and publication including any claim for compensation related to the use of the materials.

- Check here if you grant permission for your child's image to be used.
Check here if you do not want your child's image to be used for any purpose.



Parent/Guardian's name (print) _____

Parent/Guardian's signature _____

Date _____

For Office Use:

- Entered in Green Ribbon _____
Cloverbud card sent date _____
Member card sent date _____

C56-21 Revised April 2008

University of Vermont Extension and U.S. Department of Agriculture, cooperating, offer education and employment to everyone without regard to race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, and marital or familial status.