4-H Summer Fun classes are a great way for young people to learn more, experience more, and enjoy more. To schedule a registration appointment, please call Beth Davis, 4-H Agent at 336-599-1195. All participants must complete an Enrollment Form, Summer Fun Registration Form, & Medical Release Form (notarized), and payment is due with registration.
**1. 4-H Investigates**

<table>
<thead>
<tr>
<th>Dates</th>
<th>June 17-19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time</td>
<td>8:00 am-5:00 pm</td>
</tr>
<tr>
<td>Ages</td>
<td>Rising 6th-8th Graders</td>
</tr>
<tr>
<td>Instructors</td>
<td>Guest Speakers/4-H Staff</td>
</tr>
<tr>
<td>Location</td>
<td>Randolph County</td>
</tr>
<tr>
<td>Cost</td>
<td>$25</td>
</tr>
<tr>
<td>Class Size</td>
<td>8</td>
</tr>
</tbody>
</table>

Do you love shows like CSI or NCIS? If so, then this is the program for you! Participants will become detectives to solve a mock murder mystery. Solve this crime by exploring various techniques including blood typing, forensic anthropology, fingerprint analysis, impression analysis, hair analysis, blood spatter, and DNA evidence. We will be traveling to Randolph County each day. Transportation, lunch and snacks will be provided. (Parents—please be advised that field trips may include places such as county jail, funeral home, animal diagnostic lab, etc.)

**2. Cloverbud Nutrition**

<table>
<thead>
<tr>
<th>Date</th>
<th>June 18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time</td>
<td>9:00 am-12:00 pm</td>
</tr>
<tr>
<td>Ages</td>
<td>5-8</td>
</tr>
<tr>
<td>Instructors</td>
<td>Jennifer Grable, FCS Agent</td>
</tr>
<tr>
<td>Location</td>
<td>County Office Building</td>
</tr>
<tr>
<td>Cost</td>
<td>$15</td>
</tr>
<tr>
<td>Class Size</td>
<td>9</td>
</tr>
</tbody>
</table>

Cloverbuds (5-8 year olds) are invited to come and learn how to make some basic snacks and foods. Learn how to be kitchen and food safe as well as get some tasty treats to try new foods. We will have worksheets, hands-on activities, test tastes, and food demonstrations.

**3. Safe Sitter**

<table>
<thead>
<tr>
<th>Date</th>
<th>June 25</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time</td>
<td>9:30 am-4:30 pm</td>
</tr>
<tr>
<td>Ages</td>
<td>11-14</td>
</tr>
<tr>
<td>Instructors</td>
<td>Jennifer Grable, FCS Agent</td>
</tr>
<tr>
<td>Location</td>
<td>County Office Building</td>
</tr>
<tr>
<td>Cost</td>
<td>$20</td>
</tr>
<tr>
<td>Class Size</td>
<td>12</td>
</tr>
</tbody>
</table>

Are you interested in becoming a babysitter? Come and receive training to become a certified babysitter and take home your own handbook. You will learn about dealing with injuries, how to stay safe while babysitting, the difference in children’s ages and how to care for them, how to prevent problem behavior, how to run your own babysitting business, and more! Participants will need to bring a bag lunch.

**4. Just for Girls**

<table>
<thead>
<tr>
<th>Date</th>
<th>June 26</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time</td>
<td>9:00 am-2:00 pm</td>
</tr>
<tr>
<td>Ages</td>
<td>Rising 5th-12th graders</td>
</tr>
<tr>
<td>Instructors</td>
<td>Guest Speakers/4-H Staff</td>
</tr>
<tr>
<td>Location</td>
<td>County Office Building</td>
</tr>
<tr>
<td>Cost</td>
<td>$5</td>
</tr>
<tr>
<td>Class Size</td>
<td>12</td>
</tr>
</tbody>
</table>

This class is JUST for girls! Come learn about hair, makeup, clothing, eating healthy, staying fit, and participate in a meaningful service project. We will have guest speakers coming in and teach you about these different topics. Participants will need to wear comfortable clothes for exercising. Tell your friends to sign up and come have a fun day just for girls!
5. **Zoo Snooze**

<table>
<thead>
<tr>
<th>Dates</th>
<th>June 26-27</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time</td>
<td>5:00 pm (Th)-5:00 pm (Fri)</td>
</tr>
<tr>
<td>Ages</td>
<td>8-12</td>
</tr>
<tr>
<td>Instructors</td>
<td>NC Zoo Staff</td>
</tr>
<tr>
<td>Location</td>
<td>NC Zoo, Asheboro</td>
</tr>
<tr>
<td>Cost</td>
<td>$30</td>
</tr>
<tr>
<td>Class Size</td>
<td>12 youth</td>
</tr>
</tbody>
</table>

Go batty over creatures of the night! Explore skills and senses of nocturnal animals in this fun and exciting overnight program. Concentrating on bats and owls, we'll shed some light on the mystery of what’s really going bump in the night. Through presentations and activities, participants will develop a greater understanding of our nighttime neighbors, their roles in our environment and how we can help them. Students will have a blast building bat boxes and a hoot dissecting owl pellets. We will meet at the Extension Office at 5:00 pm on Thursday, and head to the Zoo. Participants will need to wear comfortable walking shoes and bring items for a sleepover. When we wake up on Friday morning, we’ll have a quick program and then we’ll be free to explore the zoo!

6. **Hunter Safety Education**

<table>
<thead>
<tr>
<th>Date</th>
<th>July 1-3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time</td>
<td>9:00 am-12:30 pm</td>
</tr>
<tr>
<td>Ages</td>
<td>9-18</td>
</tr>
<tr>
<td>Instructor</td>
<td>Chuck Gentry</td>
</tr>
<tr>
<td>Location</td>
<td>County Office Building</td>
</tr>
<tr>
<td>Cost</td>
<td>$5</td>
</tr>
<tr>
<td>Class Size</td>
<td>25</td>
</tr>
</tbody>
</table>

Learn all you need to know about hunter safety, so you will be ready for hunting season! By participating in this class, participants will learn the necessary information needed to receive a hunting license.

7. **Yoga for Cloverbuds**

<table>
<thead>
<tr>
<th>Date</th>
<th>July 8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time</td>
<td>8:30 am-12:30 pm</td>
</tr>
<tr>
<td>Ages</td>
<td>5-8</td>
</tr>
<tr>
<td>Instructor</td>
<td>Hillary Bergmark</td>
</tr>
<tr>
<td>Location</td>
<td>County Office Building</td>
</tr>
<tr>
<td>Cost</td>
<td>$5</td>
</tr>
<tr>
<td>Class Size</td>
<td>12</td>
</tr>
</tbody>
</table>

This introductory Yoga class for younger children is a great opportunity to learn yoga basics through fun and interactive games that are specifically geared towards them. Youth will learn a variety of basic yoga poses and breathing techniques and play lots of fun games that will get them moving and encourage health. Participants will need to bring a yoga/exercise mat or beach towel, and pillow. They should dress comfortably in appropriate exercise clothing.

8. **Busy Bees**

<table>
<thead>
<tr>
<th>Date</th>
<th>July 9</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time</td>
<td>9:00 am-12:00 pm</td>
</tr>
<tr>
<td>Ages</td>
<td>5-8</td>
</tr>
<tr>
<td>Instructors</td>
<td>Person County Beekeepers</td>
</tr>
<tr>
<td>Location</td>
<td>County Office Building</td>
</tr>
<tr>
<td>Cost</td>
<td>$2</td>
</tr>
<tr>
<td>Class Size</td>
<td>20</td>
</tr>
</tbody>
</table>

During this class, Cloverbud participants will learn just how busy bees are! Person County Beekeepers Association members will teach participants how and why plants are pollinated, what products come from the hive, and the parts of the honey bee.

9. **Yoga**

<table>
<thead>
<tr>
<th>Date</th>
<th>July 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time</td>
<td>8:30 am-12:30 pm</td>
</tr>
<tr>
<td>Ages</td>
<td>9-18</td>
</tr>
<tr>
<td>Instructor</td>
<td>Hillary Bergmark</td>
</tr>
<tr>
<td>Location</td>
<td>County Office Building</td>
</tr>
<tr>
<td>Cost</td>
<td>$5</td>
</tr>
<tr>
<td>Class Size</td>
<td>12</td>
</tr>
</tbody>
</table>

This introductory Yoga class for youth will focus on learning appropriate breathing techniques, basic yoga poses, and will conclude with a complete Yoga class led by a certified instructor. This is a great opportunity for teens that are interested in yoga for exercise and/or relaxation. Participants will need to bring a yoga/exercise mat or beach towel, and pillow. They should dress comfortably in appropriate exercise clothing.
### 10. 4-H Night at the Durham Bulls

<table>
<thead>
<tr>
<th>Date:</th>
<th>July 14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time:</td>
<td>6:30 pm-Until</td>
</tr>
<tr>
<td>Ages:</td>
<td>All ages</td>
</tr>
<tr>
<td>Location:</td>
<td>Durham Bulls Athletic Park</td>
</tr>
<tr>
<td>Cost:</td>
<td>$15 per person</td>
</tr>
<tr>
<td>Class Size:</td>
<td>50</td>
</tr>
</tbody>
</table>

Bring your family out to enjoy a fun night at the Durham Bulls! We will have a special section just for Person County 4-H. Tickets are for everyone, no age limit! We will be there during All-Star Week and will be watching the Homerun Derby!

### 11. iDentity Camp

<table>
<thead>
<tr>
<th>Dates:</th>
<th>July 15-17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time:</td>
<td>8:00 am-5:00 pm</td>
</tr>
<tr>
<td>Ages:</td>
<td>9-18</td>
</tr>
<tr>
<td>Instructors:</td>
<td>Guest Speakers/4-H Staff</td>
</tr>
<tr>
<td>Location:</td>
<td>Guilford County</td>
</tr>
<tr>
<td>Cost:</td>
<td>$25</td>
</tr>
<tr>
<td>Class Size:</td>
<td>8</td>
</tr>
</tbody>
</table>

During this three day multi-county camp, participants will travel to Guilford County and learn all about themselves by discovering just how different we all are. They will learn what makes them unique and empower others to appreciate the differences in others. They will learn about what makes them unique and appreciating the differences in others. Topics include learning about military families, different ethnicities, what it’s like to be blind, different social classes, aging adults, and more. Travel, lunch and snacks will be provided.

### 12. Paddling on Mayo

<table>
<thead>
<tr>
<th>Date:</th>
<th>July 29</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time:</td>
<td>9:00 am-12:00 pm</td>
</tr>
<tr>
<td>Ages:</td>
<td>10-18</td>
</tr>
<tr>
<td>Instructors:</td>
<td>Person Co. Parks &amp; Rec.</td>
</tr>
<tr>
<td>Location:</td>
<td>Mayo Park</td>
</tr>
<tr>
<td>Cost:</td>
<td>$3</td>
</tr>
<tr>
<td>Class Size:</td>
<td>12</td>
</tr>
</tbody>
</table>

Come enjoy nature and get a little exercise as you paddle Mayo Lake. You will learn how to control a canoe and kayak, as well as safety while paddling. Closed-toed shoes are required, and sunscreen and bug spray are recommended. You will also want to wear something you don’t mind getting wet! Parents/guardians will need to drop participants off at Mayo Park office.

### 13. Sculpting

<table>
<thead>
<tr>
<th>Date:</th>
<th>July 30</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time:</td>
<td>10:00 am-12:00 pm</td>
</tr>
<tr>
<td>Ages:</td>
<td>9-18</td>
</tr>
<tr>
<td>Instructor:</td>
<td>Cindy Biles, Local Artist</td>
</tr>
<tr>
<td>Location:</td>
<td>County Office Building</td>
</tr>
<tr>
<td>Cost:</td>
<td>$15</td>
</tr>
<tr>
<td>Class Size:</td>
<td>15</td>
</tr>
</tbody>
</table>

Cindy Biles, a local artist from Saxapahaw, will teach participants techniques on sculpting animals, and youth will have the opportunity to create their own masterpiece! Ms. Biles will supply the clay and tools. Participants will need to bring their imagination, a little patience, and a picture of what type of animal they’d like to create.

### 14. Eric Carle Creations

<table>
<thead>
<tr>
<th>Date:</th>
<th>July 31</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time:</td>
<td>9:00 am-12:00 pm</td>
</tr>
<tr>
<td>Ages:</td>
<td>5-8</td>
</tr>
<tr>
<td>Instructor:</td>
<td>Sybil Burlingham-Knapp</td>
</tr>
<tr>
<td>Location:</td>
<td>County Office Building</td>
</tr>
<tr>
<td>Cost:</td>
<td>$5</td>
</tr>
<tr>
<td>Class Size:</td>
<td>10</td>
</tr>
</tbody>
</table>

Participants will learn how illustrator, Eric Carle creates his pictures and will make a book of their own inspired by their personal interests. They will use their creativity to write and illustrate their own book using paint, tissue paper, and other tools. Participants will need to wear old clothes or a paint smock.
15. Junk Drawer Robotics

Have you ever built a robot from junk? Here’s your chance! Participants will travel to Rockingham County for this three day multi-county camp and will be challenged to build a robotic arm from everyday household items. Youth will gain an understanding of the basic science concepts related to robotics while building skills in science, technology, and engineering. This program is for youth who love science and love to design things. Travel, lunch and snacks will be provided.

<table>
<thead>
<tr>
<th>Dates:</th>
<th>August 5-7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time:</td>
<td>8:00 am-4:00 pm</td>
</tr>
<tr>
<td>Ages:</td>
<td>Rising 6th-8th Graders</td>
</tr>
<tr>
<td>Instructors:</td>
<td>North Central 4-H Agents</td>
</tr>
<tr>
<td>Location:</td>
<td>Rockingham County</td>
</tr>
<tr>
<td>Cost:</td>
<td>$30</td>
</tr>
<tr>
<td>Class Size:</td>
<td>8</td>
</tr>
</tbody>
</table>

Registration Process

- To register for 4-H Summer Fun, please call or email Beth Davis, 4-H Agent at 336-599-1195 or beth_davis@ncsu.edu to set up an appointment to register. The Person County Office hours are 8:30 am-5:00 pm and the address is 304 S. Morgan Street in Roxboro.

- Person County 4-H Summer Fun is open to all Person County youth between the ages of 5-18. Each class has its own age requirement, so please be mindful of that when registering.

- You must register in person and have completed 1) the Summer Fun Registration Form, 2) the 4-H Enrollment Form, and 3) the Medical Release Form. The Medical Release Form must be notarized, which can be done in our office at no charge. Please do NOT sign the form before it is notarized. It must be signed in the presence of the notary public.

- Registration is first come, first serve. Payment is required at the time of registration. Cash and checks made payable to Person County are accepted.

- If a 4-Her has earned Clover Cash, he/she may use their Clover Cash to help pay for registration.

- We follow the NC 4-H Code of Conduct, so please go over this with your child before they attend a Summer Fun class. The Code of Conduct can be found here: http://www.nc4h.org/uploads/documents/publications/forms/4-H_codeofconduct.pdf.

- There will be no refunds, unless a class is cancelled.

- For classes not held at the County Office Building, participants will be emailed directions to the location of the class, or transportation will be provided. If transportation is being provided, it will be noted in the class description.

- Parents/guardians must sign their child in when dropping them off and sign their child out when picking them up.
### 4-H Summer Fun Registration Form

**Name of Youth:**

**Age:**

**Names of Parents/Guardians:**

**Date of Birth:**

**Best Contact Phone #:**

**Gender:** [ ] Male [ ] Female

**Email Address:**

Please put a check next to the number of the classes you wish to register for. If any classes are full, we will add you to the waiting list. Payment won’t be taken for waiting list registration.

<table>
<thead>
<tr>
<th>#</th>
<th>Name of Class</th>
<th>Ages</th>
<th>Dates &amp; Times</th>
<th>Cost</th>
<th>Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>4-H Investigates 6th-8th Graders</td>
<td>June 17-19, 8 am-5 pm</td>
<td>$25.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Cloverbud Nutrition 5-8</td>
<td>June 18, 9 am-12 pm</td>
<td>$15.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Safe Sitter 11-14</td>
<td>June 25, 9:30 am-4:30 pm</td>
<td>$20.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Just for Girls 5th-12th Graders</td>
<td>June 26, 9 am-2 pm</td>
<td>$5.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Zoo Snooze 8-12</td>
<td>June 26-27, overnight</td>
<td>$30.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Hunter Safety Education 9-18</td>
<td>July 1-3, 9 am-12:30 pm</td>
<td>$5.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Yoga for Cloverbuds 5-8</td>
<td>July 8, 8:30 am-12:30 pm</td>
<td>$5.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Busy Bees 5-8</td>
<td>July 9, 9 am-12 pm</td>
<td>$2.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Yoga 9-18</td>
<td>July 10, 8:30 am-12:30 pm</td>
<td>$5.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>4-H Night @ Durham Bulls All</td>
<td>July 14, 6:30 pm-Until ___ x $15.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>iDentity Camp 9-18</td>
<td>July 15-17, 8 am-5 pm</td>
<td>$25.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Paddling on Mayo 10-18</td>
<td>July 29, 9 am-12 pm</td>
<td>$3.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Sculpting 9-18</td>
<td>July 30, 10 am-12 pm</td>
<td>$15.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Eric Carle Creations 5-8</td>
<td>July 31, 9 am-12 pm</td>
<td>$5.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Junk Drawer Robotics 6th-8th Graders</td>
<td>August 5-7, 8 am-5 pm</td>
<td>$30.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>4-H Tee Shirt (optional)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clover Cash Used</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTAL

[Images and logos present, indicating 4-H and related organizations.]
4-H MEDICAL INFORMATION AND INFORMED CONSENT FOR TREATMENT
FOR NC 4-H SPONSORED EVENTS

4-H’ers Name_____________________________________

PLEASE READ AND COMPLETE THE FOLLOWING FORM. THIS FORM MUST BE PRESENTED AT
THE OFFICIAL REGISTRATION FOR THE 4-H SPONSORED EVENT BEING ATTENDED.

I. Medical Information

Known allergies to foods, drugs, insect stings or bites, etc.: ____________________________

Special medical concerns or conditions that event supervisors should know about, including contagious
illnesses, epilepsy, asthma, diabetes, previous injuries to bones/joints, etc.
______________________________________________________________________________

List special dietary needs: _________________________________________________________

Medications currently being taken (name of medication, dose, and frequency):
______________________________________________________________________________

Family Physician: Name ____________________________ Phone # (____) ____________
Address_____________________________________________________

II. Insurance Information

The 4-H program purchases insurance for youth participants for many sponsored events. In some cases,
this coverage will not pay for some medical expenses and it may be necessary to bill the family or your
insurance company.

Health Insurance Company _________________________________________________________
Health Insurance Policy # _________________________________________________________
Company Address ________________________________________________________________
Company Telephone Number (____) ____________________________

III.

If you are a person with a disability and desire any assistive devices, services or other accommodations
to participate in this activity, please contact ________ [name, office] at ________ [phone
number/TTY] during business hours of 8 a.m. and 5 p.m. to discuss accommodations at least ________
[hours/days] prior to the activity.

Signatures Acknowledging Parts I, II, and III

Parent's/Guardian's signature: ____________________________ Date: ____________
Participant’s Signature: ____________________________ Date: ____________
Parent/Guardian Telephone #: Home ________________________ Work ________________________

Must be completed each year by 4-H’er and Parent/Guardian. If health history changes within that year, it is the 4-H’er &
Parent/Guardian’s responsibility for updating information.

Approved as of 3/02/06
IV. Informed Consent

In the event that a participant needs minor medical care from 4-H or more significant medical care from a qualified health care provider, including in rare cases possible hospitalization and/or surgery, the parent/guardian is asked to sign the informed consent form below. In case of serious medical condition, 4-H will make every effort to notify the parents, but the first priority may be providing care to the participant.

Authorization to Consent to Health Care for Minor

I, ________________________________, of ________________________ County, am the custodial parent having legal custody of ________________________, a minor child, age ________, born _______________________________. I authorize any adult(s) acting as agents (including official volunteers) or employees of the ________________________ 4-H program and in whose care the minor child has been entrusted, to do any acts which may be necessary or proper to provide for the health care of the minor child, including, but not limited to, the power (i) to provide for such health care at any hospital or other institution, or the employing of any physician, dentist, nurse, or other person for such health care, and (ii) to consent to and authorize any health care, including administration of anesthesia, X-ray examination, performance of operations, and other procedures by physicians, dentists, and other medical personnel except the withholding or withdrawal of life sustaining procedures.

This consent shall be effective for one year from the date of the execution.

Custodial Parent Signature______________________________ Date________

STATE OF NORTH CAROLINA
COUNTY OF ________________________

On this _______ day of __________________, 20___, personally appeared before me the said named, ________________________, to me known and known to me to be the person described in and who executed the foregoing instrument and he (or she) acknowledged that he (or she) executed the same and being duly sworn by me, made oath that the statements in the foregoing instrument are true.

My commission expires ________________________________________, 20____.

Notary Public
________________________________

(OFFICIAL SEAL)
4-H Enrollment Form

Name of 4-H Group/Unit: __________________________________________ Year: __________

Member Name: __________________________________________________________

First          Middle          Last

Address: ________________________________________________________________

Street Address     City          State          Zip Code

Phone: (____) __________________ Email: ______________________________ County: ______________

Gender*:  ☐ Male  ☐ Female Date of Birth: ___________ Grade: ______ School Attending: _______________________

If re-enrolling in 4-H, how many years have you been in 4-H: ______

Do you live*:  ☐ Farm         ☐ City over 50,000 people       ☐ City 10,000-50,000 people
(Choose only one)  ☐ Town under 10,000 people or rural non-farm    ☐ Suburbs of city over 50,000 people
☐ Military installation: __________________________________________________

Do you have parent/guardian(s) active in the military?  Yes___ No____

If yes, circle all that apply:   Army    Air Force    Navy    Marines    Coast Guard    National Guard(Air & Army)    Reserves

Ethnic group*:  A. Choose One:  ☐ Hispanic or Latino  ☐ Non-Hispanic or Latino

B. Choose all that apply:

☐ White or Caucasian  ☐ Asian
☐ Black or African-American  ☐ Native Hawaiian or other Pacific Islander
☐ American Indian or Alaska Native  ☐ Other ______

Parent or Guardian: ______________________________________________________

First          Middle          Last

Address: ________________________________________________________________

Street Address     City          State          Zip Code

Phone: __________________ (____) __________________ (____) __________________ (____)

Area Code    Daytime/Cell phone    Area Code    Home phone    Email (if applicable)

Additional Parent or Guardian: _____________________________________________

First          Middle          Last

Address: ________________________________________________________________

Street Address     City          State          Zip Code

Phone: __________________ (____) __________________ (____) __________________ (____)

Area Code    Daytime/Cell phone    Area Code    Home phone    Email (if applicable)

1. A parent or guardian should sign below whichever statements you wish to apply to the youth’s involvement in 4-H programs.

☐ I agree to allow 4-H to take photographs/audio/video of my child for use in 4-H and other N.C. Cooperative Extension educational, promotional, and/or marketing materials. Neither individual addresses nor telephone numbers will be published within these materials.

☐ I do not wish for 4-H to take photographs/audio/video of my child for use in 4-H and other N.C. Cooperative Extension educational, promotional or marketing purposes.

2. The enrolling youth is bound by the NC 4-H Code of Conduct and Disciplinary Procedure for 4-H events and activities. The youth should initial here if he/she has received and reviewed the NC 4-H Code of Conduct and Disciplinary Procedure for 4-H events and activities: ______________.

*This information is required for all federally assisted programs and is solely used for the purpose of determining compliance with Federal civil rights laws; your responses will not affect consideration of your application. By providing this information, you will assist us in assuring that this program is administered in a nondiscriminatory manner.

For office use only
4-H Membership # _______________ Date entered: ______________

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Revised 10/21/13