

FAMILY INFORMATION				
County:		Address:		
Family Name:		Address 2:		
Family Email:		City:		
Mobile Phone Number:		State:	TX	Postal Code: <input type="text"/>
MEMBER INFORMATION		DEMOGRAPHICS		
First Name:		Residence:	<input type="checkbox"/> Farm <input type="checkbox"/> Town Under 10,000 and Rural-Non Farm <input type="checkbox"/> Town, City or Suburbs 10,000 to 50,000 <input type="checkbox"/> City or Suburb More Than 50,000 <input type="checkbox"/> City - Central, More Than 50,000	
Middle Name:				
Last Name:				
Preferred Name:		Are you of Hispanic or Latino ethnicity?	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non Hispanic <input type="checkbox"/> Prefer Not To State	
Birth Date:				
Member Email:		Race:	<input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Other (race not listed) <input type="checkbox"/> White <input type="checkbox"/> Prefer Not To State	
Member Mobile Phone:				
Previous Years in Program:				
Gender:	<input type="checkbox"/> Female <input type="checkbox"/> Male			
VOLUNTEER TYPE				
<input type="checkbox"/> Program Volunteer	<input type="checkbox"/> AgriLife Extension Employee (background check completed by AgriLife HR)			
<input type="checkbox"/> Project Volunteer	<input type="checkbox"/> Certified Shooting Sports Coach <input type="checkbox"/> Livestock Mentor (Master Volunteer) <input type="checkbox"/> Project Leader			
<input type="checkbox"/> Club Volunteer	<input type="checkbox"/> Club Manager <input type="checkbox"/> Parent Volunteer/Activity Leader (Most common)			
EMERGENCY CONTACT		EMERGENCY CONTACT 2		
Emergency Contact Full Name:		Emergency Contact Full Name:		
Relationship to Member:		Relationship to Member:		
Emergency Contact Phone:		Emergency Contact Phone:		
Emergency Contact Email:		Emergency Contact Email:		
CLUBS				
Club		Club Volunteer Type		
		<input type="checkbox"/> Club Manager <input type="checkbox"/> Parent Volunteer/Activity Leader (Most common)		
		<input type="checkbox"/> Club Manager <input type="checkbox"/> Parent Volunteer/Activity Leader (Most common)		
		<input type="checkbox"/> Club Manager <input type="checkbox"/> Parent Volunteer/Activity Leader (Most common)		
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		<input type="checkbox"/> Club Manager <input type="checkbox"/> Parent Volunteer/Activity Leader (Most common)		
PROJECTS				
Project	Club	Project Volunteer Type		Years in Project
		<input type="checkbox"/> Certified Shooting Sports Coach <input type="checkbox"/> Livestock Mentor (Master Volunteer) <input type="checkbox"/> Project Leader		
		<input type="checkbox"/> Certified Shooting Sports Coach <input type="checkbox"/> Livestock Mentor (Master Volunteer) <input type="checkbox"/> Project Leader		
		<input type="checkbox"/> Certified Shooting Sports Coach <input type="checkbox"/> Livestock Mentor (Master Volunteer) <input type="checkbox"/> Project Leader		
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		<input type="checkbox"/> Certified Shooting Sports Coach <input type="checkbox"/> Livestock Mentor (Master Volunteer) <input type="checkbox"/> Project Leader		
		<input type="checkbox"/> Certified Shooting Sports Coach <input type="checkbox"/> Livestock Mentor (Master Volunteer) <input type="checkbox"/> Project Leader		

TEXAS 4-H YOUTH DEVELOPMENT  
VOLUNTEER APPLICATION - PAGE 2

4-H Year: 2023-2024

MILITARY			
Military Service:	<input type="checkbox"/> I Am Serving In The Military	<input type="checkbox"/> I Have Retired From The Military	<input type="checkbox"/> I Have A Family Member Serving In The Military
Branch of Service:	<input type="checkbox"/> Air Force	<input type="checkbox"/> Coast Guard	<input type="checkbox"/> Marines
Branch Component:	<input type="checkbox"/> Army	<input type="checkbox"/> DOD Civilian	<input type="checkbox"/> Navy
	<input type="checkbox"/> Active Duty	<input type="checkbox"/> National Guard	<input type="checkbox"/> Not Applicable
			<input type="checkbox"/> Reserves
			<input type="checkbox"/> Not Applicable
OTHER		COMMUNICATION INFORMATION	
Years as a 4-H volunteer including this year?		Secondary Email:	
Communication Preference:	<input type="checkbox"/> Email	<input type="checkbox"/> Postal Mail	Residence
Marital Status:	<input type="checkbox"/> Married	<input type="checkbox"/> Single	Address City, State, Zip Code:
	<input type="checkbox"/> Divorced		(If different than mailing address)
EMPLOYMENT INFORMATION			
Job Title:		Work Phone:	
Employer:		Work Extension:	
VOLUNTEER INFORMATION			
Shooting Sports Project Enrollment:	<input type="checkbox"/> Not In Shooting Sports	<input type="checkbox"/> Hunting Skills	<input type="checkbox"/> Pistol
	<input type="checkbox"/> Archery	<input type="checkbox"/> Muzzelloading	<input type="checkbox"/> Rifle
			<input type="checkbox"/> Shotgun
What county do you LIVE in?			
TEXAS 4-H FOUNDATION CLOVER CLUB INFORMATION			
Are you a 4-H Alumnus?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Are willing to receive information from the Texas 4-H Foundation Clover Club (Friends & Alumni of Texas 4-H)?
If yes, what state?			<input type="checkbox"/> YES
If yes, what county?			<input type="checkbox"/> NO
HEALTH CARE INFORMATION (optional)			
<b>Health Care Statement:</b> I understand that the information requested on this form is intended to help inform staff of any pre-existing medical conditions. You are accountable for providing an accurate medical history. If you have a pre-existing medical condition, participation in any strenuous activities or recreational time may not be recommended. Final determination about whether or not you should participate in any activities is the responsibility of you and your physician. I understand and acknowledge that my failure to disclose relevant information may result in harm to me and/or others during this camp/program. By signing my name, I represent and warrant that I have provided all relevant information regarding pre-existing medical conditions and that it is accurate and complete. I agree to notify the organizers of the camp/program for which I am participating in of any changes in my medical conditions prior to or during the camp/program.			
I agree to the Health Care statement above.	YES	NO	List any special services:
Primary Care Physician:			Primary Care Physician Phone:
Insurance Company:			Policy Number:
Name of Primary Policy Holder:			Relationship to Participant:
REFUND POLICY			
<b>PARTICIPATION FEES AND VOLUNTEER APPLICATION FEES</b>			
<ul style="list-style-type: none"> <li>Participation fees are nonrefundable once the membership or application has been approved by the county office.</li> <li>Once a Volunteer Application has been SUBMITTED into the system the application fee is nonrefundable.</li> </ul>			
<b>EVENT AND ACTIVITY REGISTRATION</b>			
<ul style="list-style-type: none"> <li>The general refund policy for the Texas 4-H Program is that no refunds are provided to a 4-H member or family once the registration is APPROVED. In extreme circumstances, such as death in immediate family, severe illness/accident, or cancellation of event, refunds will be provided, minus any expenses already incurred by the event/activity.</li> <li>It is the decision of the event coordinator for that particular event if a refund is provided or not, with approval of Texas 4-H Youth Development Program Director. Contact your Local County Extension Office with questions about refunds.</li> </ul>			
<b>ANIMAL VALIDATION (ONLY APPLIES TO YOUTH PROFILES)</b>			
<ul style="list-style-type: none"> <li>All fees paid are non-refundable once an animal validation has been accepted.</li> </ul>			
<b>Signature to confirm that you have read the refund policy and that all information above is accurate:</b>			
_____			
ADULT ENROLLMENT FORMS			
<input type="checkbox"/> Waiver, Indemnification, and Medical Treatment Authorization	<input type="checkbox"/> Volunteer Code of Conduct	<input type="checkbox"/> Media and Photograph Release	

# TEXAS 4-H YOUTH DEVELOPMENT VOLUNTEER CODE OF CONDUCT

4-H Year: 2022-2023

The following guidelines assist volunteers in understanding personal conduct expectations during the course and scope of their duties. 4-H Volunteers must abide by all applicable Texas A&M AgriLife Extension Service procedures.

## A 4-H VOLUNTEER IS EXPECTED TO:

- Respect the individual rights, safety, and property of others.
- Carry-out the assigned position responsibilities that he or she has accepted. Volunteers should be provided with a written position description to which they agree. One copy should be kept on file in the county Extension office and one given to the Volunteer.
- Participate in routine volunteer training opportunities and activities pertinent to their duties.
- Be committed to the core values, education goals, and standards of the 4-H Youth Development Program.
- Support the 4-H Youth Development Program and its rules and guidelines.
- Recognize and support the responsibilities of the 4-H Youth Development Program staff in setting program standards, priorities, and direction.
- Support the non-discrimination practices of the 4-H Youth Development Program, including: race, color, sex, religion, national origin, age, disability, genetic information, veteran status, sexual orientation or gender identity.
- Make reasonable efforts to provide access to 4-H related information and equal opportunities to youth in their community to participate in project activities, awards programs and other events and activities.
- Adhere to Texas laws on the use of motor vehicles.
- Not consume alcohol and/or illegal drugs (or to be under the influence thereof) while involved or en route to or from any 4-H event, meeting or activity.
- Serve as good examples for youth in both public and private life. This includes appropriate dress, language and moral conduct in accordance with the generally recognized standards of our society.
- Maintain direct supervision of 4-H members and not leave their delegation unsupervised unless approval was received from the individual in charge of the overall event or delegation.
- Not sign a lease agreement, use permit with schools or other public or private facilities, or grant or order contracts on behalf of Texas A&M AgriLife Extension Service. All such agreements shall be forwarded to the local office of Texas A&M AgriLife Extension Service for review and forwarding to appropriate official for signature.
- Recognize Texas Law requiring all adults to report suspected child abuse to proper law enforcement or county child protective services.
- Safeguard and hold confidential any information gained through administrative duties involving supervision of personnel or other information identified by the program as being confidential.
- Not physically or verbally abuse a youth member or use corporal punishment to reprimand 4-H members for inappropriate behavior.
- Understand that falsifying enrollment information, budgets, documents or records is a breach of the Code of Ethics.
- Not engage in sexual activity with youth members.
- Adhere to fiscal responsibility and financial best management practices as outlined by the Texas A&M AgriLife Extension Service.
- Register as a volunteer in only one county.
- Not receive compensation for professional services provided in support of youth 4-H activities (excluding reimbursement for expenses).

## CONSEQUENCES FOR INFRACTIONS

Volunteers' infractions of the Texas 4-H Volunteer Code of Conduct must be reported to the 4-H Youth Development staff and/or Texas A&M AgriLife Extension Service Office. Consequences may include:

- Discussion of the inappropriate actions with the 4-H leader, clarification of the policy.
- Reassignment or suspension of volunteer.
- Termination as a 4-H volunteer.
- Notification of incident to the appropriate law enforcement agency.

A volunteer may be reassigned or dismissed at the sole discretion of the Texas A&M AgriLife Extension Service with or without cause. Examples of conduct which could lead to disciplinary action include, but are not limited to: illegal activity, behavior which compromises the health and safety of youth, violating an Extension policy, violation of 4-H Rules and Guidelines, willfully violating or causing children to violate rules, being habitually disruptive to the overall program, unwilling or unable to work amicably with agents and/or other volunteers, exhibit conduct which is harmful to the 4-H program's reputation, or failure to rotate the leadership role. The nature and seriousness of the infraction or violation will determine whether the option of reassignment or dismissal should be considered. An adult volunteer who is unable to grasp the overall philosophy of youth development may be asked to leave and/or counseled toward other avenues of volunteering. A child who has a parent dismissed as a 4-H volunteer is still eligible to participate in 4-H.

## IMMEDIATE REMOVAL OF AN ADULT FROM AN EVENT

Any adult may be required to immediately leave any 4-H function for using abusive language, threatening any individual, becoming violent, causing or threatening bodily harm to any minor (including their own child) or adult, or exhibiting signs of being under the influence of alcohol or drugs.

VOLUNTEER SIGNATURE

VOLUNTEER PRINTED NAME

COUNTY

DATE