



Cache County 4-H First Step Horse Camp

June 20, 2011 Cache County Fair Grounds

Cost \$20.00, Registration Due May 26, 2011



Office Use Only
Amount Paid \$ _____
Date: ____/____/____

Participant's Information (Please Print Clearly)			
()			
Member's Name	Home Phone	County	
Address		City, St, Zip	
Member's Email Address		Family Email Address	
		Grade (as of Jan 1)	Birth Date (mm/dd/yy) / /
Mother/Guardian Name ()		Father/Guardian Name ()	
Alternate Phone – Work or Cell		Alternate Phone – Work or Cell	
LEADER CERTIFICATION		PARENT CERTIFICATION	
I certify that the First Step Camp Applicant named above is currently enrolled in 4-H, participates in Club meetings, indicates a continuing interest to participate in the 4-H horse program, and can guide, walk and trot his/her horse with confidence.		I understand the purpose and objectives of First Step Camp and give my approval for my child to participate in this event. I confirm that my child can guide, walk and trot his/her horse with confidence	
Club Leader Signature	Date	Parent/Guardian Signature	Date

Gender:

Male

Female

T- Shirt

Youth Medium

Youth Large

Youth XL

Adult Small

Adult Medium

Adult Large

Adult XL

Other _____

Ethnicity:

Mark all that apply

White

Hispanic

Black

Native American

Asian

Pacific Islander

Other

Emergency and Medical Information

Relatives or friends to act in behalf of parent or legal guardian in case of emergency if parent or legal guardian cannot be reached:

Emergency Contact Name ()	Emergency Contact Name ()
Home Phone	Home Phone
Alternate Phone	Alternate Phone
Address	Address

Family Physician () Physician's Phone Number / / Date of last tetanus

My child has the following allergies, medical concerns or special needs: _____

Note: If bringing medications to the event or program please make sure that your name is on them and that the adult in charge is advised of the directions for administration.

In the event that none of my child's contacts listed above can be reached in an emergency, I hereby give permission to the physician selected by the 4-H staff to hospitalize, secure proper treatment for, and to order injections, anesthesia and surgery for my child named above should it be deemed necessary.

Parent / Guardian Signature

Date



REGISTRATION DEAD LINE: Please return registration forms and payment to the Cache County 4-H Office by May 26, 2011



Code of Conduct

Our primary goal of the 4-H program is to build character while participating in 4-H. We expect all youth and adults to abide by the following:

- I will exhibit positive character and behavior including (but not limited to) trustworthiness, responsibility, respectfulness, caring, citizenship and fairness.
- I will attend all sessions as part of a planned program and be in the assigned area at all times.
- I will follow guidelines and rules established for the planned programs.
- I will be responsive to the reasonable requests of the 4-H staff/club leaders and respectful of the needs for their personal safety and the safety of others.
- I will dress appropriately, use appropriate language and respect the rights of others.
- I will be respectful of public or private and will be responsible for any damage, theft or misconduct.
- I will not possess or use alcohol, illegal drugs, or tobacco products.
- I will not behave recklessly, engage in sexual misconduct, assault, threaten or harm another person.
- I will promote the spirit of inclusion and comply with equal opportunity and anti-discrimination laws.



Member Agreement (please sign)

Photo Release: Participants in USU events are sometimes photographed and videotaped for use in USU promotional and educational materials. I authorize Utah State University to record and photograph my image and/or voice for use by Utah State University or its assignees in research, educational and promotional programs; I understand and agree that these audio, video, film and/or print images may be edited, duplicated, distributed, reproduced, broadcast and/or reformatted in any form and manner without payment of fees, in perpetuity.

Code of Conduct/Waiver of Liability: I have read the 4-H Code of Conduct and agree to live up to these expectations. I am aware that all my actions and decisions affect others. I realize that my failure to act with good character could result in loss of privileges, consequences, and suspension from the event or program, or for future programs or events. I am willing to accept the appropriate and logical consequences of my actions. As a participant in a 4-H sponsored program, I release the County, State Extension programs and personnel, Utah State University and those affiliated from liability should I accidentally be injured due in part to my own negligence.

Member Signature

Date



Parent / Guardian Agreement (please sign)

Photo Release: Participants in USU events are sometimes photographed and videotaped for use in USU promotional and educational materials. I authorize Utah State University to record and photograph the image and/or voice of my child for use by Utah State University or its assignees in research, educational and promotional programs; I understand and agree that these audio, video, film and/or print images may be edited, duplicated, distributed, reproduced, broadcast and/or reformatted in any form and manner without payment of fees, in perpetuity.

Code of Conduct/Waiver of Liability: I have read the 4-H Code of Conduct, and, like my child, agree to live up to the expectations while participating in 4-H programs and events. I will support the individual in charge in maintaining appropriate behavior and in the development of good character. I agree to reimburse the 4-H program for additional transportation costs if it is necessary to send our child home because of discipline problems, illness or injury that might occur. I release the County, State Extension programs and personnel, Utah State University and those affiliated from liability should my child accidentally be injured due in part to their own negligence.

I also agree to abide by this same code of conduct and to conduct myself in an appropriate manner at all 4-H events. I am willing to accept the appropriate and logical consequences of my actions, which may include being asked to leave the event or my child being disqualified from the event and/or the 4-H Program.

Parent / Guardian Signature

Date