

Fairfax County Extension Office

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Date: December 2018

To: Parents/Guardians of youth interested in 4-H Junior Camp, June 30-July 4, 2019

From Caitlin Verdu, 4-H Youth Development Extension Agent – Arlington

RE: Registration for 2019 Fairfax, Arlington, and Alexandria 4-H Junior Camp

Information about 4-H Camp

4-H Junior Camp is held at the Northern Virginia 4-H Educational and Conference Center in Front Royal, Virginia. Campers are lodged in a room with campers of similar age, and have the opportunity to request their roommates if they like. Each room is part of a Pack, which serves as the camper's "family" during the week of camp. Packs are involved in different contests on various days and Bear Claws are awarded for spirit, participation, and demonstrations of good character!

Each day, campers go to three different classes that they sign up for prior to arriving at camp. There is free swim and recreation time each day, as well as evening programs and a campfire. Past evening programs have included Water Olympics, Newspaper Fashion Show, Talent Shows, and Scavenger Hunts. *Please note:* We do our very best to honor all class and roommate requests but cannot guarantee placement according to requests. Thank you for your flexibility and understanding.

Each year we recruit Teen Volunteers 14-18 to serve as Counselors for our camp. These teens, as well as our adult volunteers and 4-H Center Staff, complete a training series and are tested on core concepts before attending camp. In addition, each of Virginia's 4-H Centers is accredited by The American Camp Association, the authority on youth camping in the country. Our staff is trained according to the ACA requirements and you can rest assured that your child will have a safe, enjoyable experience at 4-H Camp!



Registration Information

Registration is open for the Fairfax, Arlington, and Alexandria
4-H Junior Camp (June 30 – July 4, 2019). Registration will close when camp fills, or in early
June. After registration closes, incoming registrants will be placed on a waitlist.

This year the **camp fee is \$350** and includes meals and lodging for five days and four nights, a camp t-shirt, class supplies, and transportation **from** camp.

Age Eligibility:

Lower limit: Campers and CIT's must be 9 by September 30, 2019.

Upper limit: If a child is 13, but will turn 14 by September 30, 2019, he/she is eligible to attend as a camper.

To become a 4-H Camp Counselor, a teen must be 14 or older by January 1, 2019.

**NOTE: Parents/ guardians must provide transportation for their campers TO camp on Sunday, June 30th. We will bring them back to a central location for pick-up on July 4th.

All registration materials are included in this packet and should be completed in full and submitted to your local extension office via mail (*Virginia Cooperative Extension – Fairfax Unit, Attn: FAA 4-H Camp, 12011 Government Center Parkway Suite 1050 Fairfax, VA 22035-1111*) or in-person in order for your application to be processed. We do *not* accept emailed applications.

| Completed Applications Must Contain: | | | |
|---------------------------------------------|--|--|--|
| ☐ Camper / CIT Registration | | | |
| ☐ Class Selection Form | | | |
| ☐ 4-H Health History Form with tetanus shot | | | |
| date and media release completed | | | |
| □ Code of Conduct | | | |
| ☐ Optional Medication Form (see below) | | | |
| □ Payment | | | |
| | | | |

Optional Medication Form:

-Use this form only if camper will be bringing medication (prescription or over the counter) to camp. The Northern Virginia 4-H Center requires two (2) original medication forms: first form should be returned with the registration packet, and the second form is to accompany the medication turned in at check-in when we leave for camp.

Remember: Your child's application is not complete until **ALL** parts of the registration are complete and received by the office. Your application will be returned if any information or signatures are missing.

Please also note that **we accept applications** <u>based on residency</u>. You MUST submit your application to the office for the location in which you reside.

- "I live in Arlington County but the Fairfax County office is closer to my work. Can't I just register with Fairfax County?" **NO.** If you reside in one county and attempt to register with another, your registration will not be counted as received until it has been forwarded to the appropriate office.
- "We live in Maryland but want to send our child to your camp. Can we still do that?" YES. If you live outside of Fairfax, Arlington, and Alexandria, please include a brief note explaining your or your child's affiliation with the area and/or our camp. For example, if you want your child and her/his cousin to attend camp together, or if you recently moved out-of-state but your child has attended camp in the past.
- <u>NOTE</u>: Priority will be given to local residents, but we will accept campers who live outside the area as we are able and as we deem appropriate.

Payment for Camp

As stated above, the 2019 camp fee for campers and CIT's is \$350. We accept payment in the form of check, money order, or credit card payment (please see included document for credit card payment instructions); accepted in either one payment, or in two installment payments.

Scholarships

A limited number of scholarships are also available on a need basis. Each applicant submitting a scholarship application is still asked to pay \$75 toward the camp fee to help with the cost of food and camp supplies.

Scholarship applications are due by April 26, 2019. You can find the application online at the Extension website, or by contacting your Extension Agent.

Become a Sponsor

Every year we are fortunate to be able to provide families in need with some camp scholarship funds. However, our funds are limited; we cannot always fill all scholarship requests, and families inevitably struggle to meet the cost of camp. This year, if you are able, please consider contributing funds towards sponsoring a camper whose family is in need. Contact your local office for more information.

Tax Credits

4-H Junior Camp is an overnight camp. IRS Publication 503 states that, "The cost of sending your child to an overnight camp is not considered a work-related expense." In other words, our camp is not tax deductible.

Payment Instructions

Submitting payment before submitting the registration <u>does not</u> save a spot for your camper. All forms and at least partial payment must be received by the appropriate office in order for registration to be processed.

Payment via Check or Money Order

Please make all checks or money orders payable to: Treasurer of Virginia Tech

Payment Via Credit Card

Please see attached instruction form.

Refund Policy

Once you register for camp, if you discover that your child cannot attend for any reason, our refund policy is outlined in the table below. Please note that refunds go through Virginia Tech and take approximately 6-8 weeks to process.

| Dates | Percentage | Amount |
|---------------------|------------|----------|
| Before March 29 | 100% | \$350 |
| March 29 – April 26 | 50% | \$175.00 |
| After April 26 | 0% | \$0.00 |

Counselor-in-Training (CIT) Program

If you are 13 years of age as of January 1st, you are eligible to become a CIT at camp! CIT's complete a brief training prior to camp, take a special leadership course at camp, and are given extra responsibilities to prepare them to take on the role of counselor the following year. The CIT application and fee is the same as the camper application and fee. Please follow the instructions indicated in the "To be a Counselor-in-Training" box on the registration form. Please note: All CIT's are required to attend the new camper orientation as well as the training that will be held that same afternoon.

Call for Adult Volunteers

Have you ever wanted to come to camp with us? Good news! Every year we take a handful of adult volunteers to help with supervision, class facilitation, and other duties as assigned. Volunteers serve as Lodge Deans at night, help out during the day, and have plenty of time to rest and relax, basking in the unparalleled beauty of the Blue Ridge Mountains. If you're interested and willing to come with us, let us know! Volunteers must be 19 years of age by January 1, 2019 and receive training prior to attending camp.

Important Dates

April 26, 2019: Scholarship Application Deadline

June 1, 2019: New Camper Orientation,

10:00-12:00 Fairfax Government Complex, Pennino Building

12011 Government Center Pkwy, Fairfax, VA

June 30- July 4, 2019: 4-H Camp!

We are excited to get into camping season, and hope you can join us! Remember space is limited so get your application in ASAP!

Sincerely,

4-H Youth Development – Fairfax County

If you are a person with a disability and desire assistance or accommodation, please notify Lareka Washington in the Fairfax Extension Office at (703) 324-5369 during business hours of 8 a.m. and 4:30 p.m. TDD number is (800) 828-1120.

| Payment Options | | | | |
|-------------------------------------------------------------------------------------------|--|--|--|--|
| (Select One) | | | | |
| ☐ I have enclosed the full \$350 camp fee via: | | | | |
| -Check payable to Treasurer of Virginia Tech -Receipt of online payment | | | | |
| \square I have enclosed a deposit of \$175 and will pay the remainder by April 26, 2019 | | | | |
| \square I am requesting a scholarship. | | | | |
| I have included my scholarship application and a deposit of \$75 | | | | |



Fairfax, Arlington, Alexandria 4-H Junior Camp June 30 – July 4, 2019 Camper/CIT Registration Form

| First Name: | | Last Names | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-----------------------------------------------|-------------------------------------------------|--|
| riist Name. | | Last Name: | | |
| Address: | | | | |
| City: | | State: | Zip: | |
| Birthdate: | | Age as of Jan 1s | t: Gender: | |
| Parent/Guardian Name: | | Email: | | |
| Primary Phone: | | Alt. Phone: | | |
| School Name: | | | | |
| | | | | |
| | | | | |
| Food Allergies: | | | | |
| Other Allergies: | | | | |
| T-Shirt Size (<u>adult sizes</u>): SMALL MEDIUM LARGE X-LG | | | | |
| Roommate Requests: Please Note: Requesting a roommate does not guarantee placement with that roommate. We do our best to honor requests but are limited in what we can do. | | | | |
| Indicate your top 6 class choices: | 1st: | 2nd: | 3rd: | |
| class choices. | 4th: | 5th: | 6th: | |
| | | | | |
| To be a C | Counselor-In-Training | | | |
| By in | itialing in this box, I declare my intent t | o be a Counselor-In-Training at camp | this year and commit to service and | |
| | opriate conduct therein. I have also ind ests above. | icated the Future Counselor Class as r | my <u>first</u> choice in my class selection on | |

2019 FAA Camp Class Descriptions

Adventure: Take this class if you are interested in exploration, adventure, discovery, and "wow" moments. With nature as our classroom, we will spend time investigating Happy Creek, hiking on the Appalachian Trail, building habitats for wildlife, exploring the diversity of life that Lake Culpeper supports, and finding out cool facts about the day's "creature feature." Closed-toed shoes required.

Archery: What do fletching, quivers, and recurves have in common? Find out when you learn basic archery skills in this class taught by a trained instructor. This class will have a strong emphasis on SAFETY. Closed-toed shoes required.

Arts & Crafts: Grab a paintbrush on get creative! Campers will hone their artistic skills with new challenges each day.

Basketball: Master your free-throw, sink a layup, and wow the crowd with your 3-pointer skills. Campers in basketball class will practice the foundations and show their stuff on the court. Closed-toed shoes required.

Blow off some STEAM: Feeling creative? Want to do a little strength training for your brain? Join the STEAM revolution! Drawing from the STEAM movement, this class will engage your problem solving skills with challenges involving science, technology, engineering, math, and art.

Campfire Cooking: Going on a day hike or an overnight campout? You can learn how to pack your food for the trip! Campers will make simple, nutritious and fun foods that will keep them going outside all day. Learn how to cook over a campfire so you can share your new favorites with friends and family on your next camping trip.

Canoeing: A paddle, a life jacket, and a canoe—it doesn't get much better than this! You'll learn some basic canoeing strokes, safety and have fun as you navigate the wild, wonderful waters of Lake Culpeper!

CIT Class: 13 year old campers or first-year Counselors-in Training will learn the skills necessary to become counselors and camp leaders. Develop your communication and leadership abilities and prepare yourself to become a camp counselor! Closed-toed shoes required.

High Ropes Challenge Course: Having survived the Low Challenge Course, 11-13 year-old adventurers can advance their skills through the challenging Eagle Walk, Postman's Walk, and Vine Walk; sail through over 100 feet of forest on the Zip Line; and scale the 26-feet of the incredible Climbing Wall. Make no mistake, these elements require as much, if not more, teamwork than the Low Ropes Challenge Course. *You must be 11-13 years old to register for this class.* Closed-toed shoes required.

Introduction to Digital Photography: Campers will learn basic photography techniques to capture the beauty around them. They will learn how to crop and edit the photos they take and use them for a multimedia presentation that will be featured at the camp closing ceremony!

Low Challenge Course: Test your mettle on the low challenge course. Your team will learn to communicate and work together as you tackle the Water Wheel, Wild Woozy, and Nitro Crossing. Just don't get stuck in the Spider Web! *This class is for adventurers from 9-13 years old and will not feature any of the High Ropes elements.* Closed-toed shoes required.

Outdoor Living Skills: Learn all about the skills it takes to thrive and survive in the outdoors. Pitching tents, selecting campsites, and even cooking outdoors will be the theme of this class. Oh, yeah, every brave person who takes this class gets to spend one night out in the wild! Closed-toed shoes required.

Outdoor Sports: From the baseball fields to the volleyball courts, you will learn the ins and outs of a variety of sports. You want the official rules of Gau-Gau? Hey, we've got-em! You want a soccer competition? It's your decision. A future Hall-of-Famer will help you learn the essentials to team sports throughout your active week. Closed-toed shoes required.

Outdoor Yoga: Find your zen! Campers will get flexible by practicing some basic yoga poses, breathing deeply, and finding their balance. Outdoor yoga offers a moment of calm tranquility in this busy week of camp.

Performing Arts: Show-off your dramatic and comedic chops in this class of role-playing, improv, and original production. Learn the skills—both onstage and backstage—you'll need to conquer Hollywood and Broadway. With the instruction of our master thespian, you too may one day hear, "The Best Actor Golden Globe for a Dramatic Role goes to..."

Riflery: Can you hit a bull's-eye? Find out under the instruction of a trained, qualified instructor while focusing on safety, shooting, and marksmanship skills. Closed-toed shoes required.

Spa Class: Relax in style. Learn to make quality bath scrubs, soaps, and more. You'll be the best smelling group at camp!

Beginning Swimming: For campers with little or no swimming experience, or who are not comfortable in depths over 4 feet, this class will help you learn to have fun in the water. Covers basic strokes, learning to swim underwater, floating, and treading water.

Intermediate Swimming: For campers who can swim unaided, across the pool and feel comfortable in depths over 4 feet. Covers more advanced strokes, using the diving board, and other fun water activities.

T-Shirt Art: Dazzle your peers, friends, and family with your amazingly creative artistic skills. Use paint, pieces of nature, various dyes, fabric markers, tie-dye, puff paint, and other mediums to create wearable art that will last and last.

Ultimate Frisbee: Learn to catch and throw like a pro! Campers will learn the rules of the game, play in some friendly scrimmages, and maybe even learn a fancy trick or two. Closed-toed shoes required.

Woodworking: For the craftsman and craftswoman in the bunch, join us in creating with wood! This is a class you won't want to miss. Everyone will take home a quality wood creation.





INSTRUCTIONS: Please provide detailed health information for determining appropriate supervision, support, and accommodations for the 4-H activity or event listed. **A parent or guardian must sign.** If the participant is a person with a disability and desires any assistive devices, services or other accommodations to participate in this activity, please contact your local Extension office during business hours at least 7 days prior to the event to discuss accommodations. **PLEASE PRINT ALL INFORMATION.** (NOTE: Both sides of this form must be completed.)

| Name of 4-H event in which yo | ou wish to participate: | | | | | | |
|--------------------------------------------------------------------------|--------------------------------------------------------|--------------|----------------|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Date(s) of event: | | Location: | : | | | | |
| PARTICIPANT IDENTIFICATI | ON | | | | | | |
| Name: Last First (Underline name by which you like to be called) Middle | | | | | _ Female: \square Male: \square | | |
| Mailing address: | | | | _ Participant cell phone: (|) | | |
| City: | State: | ZIP: | | Home phone: () | | | |
| Age: | Birthdate: | | Home e | email: | | | |
| Ethnicity (choose one): Hispar | nic/Latino Not Hispa | nic/Latino 🗌 | | | | | |
| Race (choose all that apply): A | American Indian/Alaskan N Native Hawaiian/Other Pad | | | | | | |
| PARENT / GUARDIAN IDENT | TFICATION (Place a chec | k beside who | to reach in | the event of an emergency. |) | | |
| ☐ First parent/guardian name: | | | First par | rent/guardian email: | | | |
| First parent/guardian phone | daytime: | E | evening: | Cell: | | | |
| ☐ Second parent/guardian nam | e: | | _ Second | parent/guardian email: | | | |
| Second parent/guardian pho | ne daytime: | | Evening: _ | | Cell: | | |
| Who has primary custody of th | e participant? | | | | | | |
| Address, if different than child: | | | | | | | |
| PHYSICIAN / INSURANCE IN | FORMATION | | | 4-H PARTICIPA | NT MEDIA RELEASE | | |
| Family physician name: | | | | The Virginia Pol | ytechnic Institute and State | | |
| Phone: () | | _ | | * | ge of Agriculture and Life | | |
| Dentist/orthodontist name: | | | | • |) periodically uses electronic | | |
| Phone: () | | _ | | | media (e.g., photographs, footage, testimonials) for | | |
| Do you carry family medical | - | (Ob | | | ucational purposes. By my | | |
| | | | <u> </u> | | form, I acknowledge receipt | | |
| Policy ID #: | | | _ | | t and give permission to the | | |
| EMERGENCY CONTACT INFO | • | | pleted) | | College of Agriculture and Life Sciences and its designee to use such reproductions for educational and publicity purposes in | | |
| Where can you be reached i | n the event of an emergeno | cy? | | | | | |
| | | | | | ut further consideration from | | |
| Phone: () Cell phone: () | | | | me. | | | |
| | | | | | t I will need to notify Virginia | | |
| - | annot be reached, who should be notified? | | | _ | e of Agriculture and Life Sciences es to my situation occur that will | | |
| Home phone: () | | | | impact this medi | a release permission. | | |
| Work phone: () | | | | | | | |
| Cell phone: () | | 1. | continued on b | ☐ Yes ☐ No |) | | |

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* 18 U.S.C. 707

| | RTICIPANT HEALTH AND MEDICAL HISTORY | APPROVAL / EMERGENCY AUTHORIZATION |
|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (Q | uestions 1-5 must be completed.) | (Please read parts 1 and 2. If the participant is under 18, |
| 1. | SPECIAL DIETARY NEEDS INSTRUCTIONS: The purpose of this section is to communicate special dietary needs, food allergies, etc. for any child, teen, or adult who will be attending a 4-H event. In the space below, please list all food allergies and/or other dietary restrictions for the person listed above and any necessary precautions that should be taken: | parents/guardians must sign in the space provided. If you are over the age of 18, please sign for yourself. If you cannot sign this due to religious reasons, you must contact your Extension office to obtain a legal waiver that must be signed. If this section is not signed, participation in the 4-H event/activity will not be allowed. You must contact your Extension office if there is a change in health status after submitting this form. |
| 2. | Has the participant ever experienced (or had special needs in) any of the following? [Check (✔) all that apply] Asthma Bleeding disorders Attention disorders (ADHD) Eating disorders Seizures/Convulsions Wears contacts Diabetes Bed Wetting Behavior Fainting spells Non-food allergies Other: Please describe any condition or need that you checked: | I give my permission for the participant named on this form to attend the designated 4-H program. He / She has permission to participate in all activities which may include swimming and other water sports under the supervision of lifeguard(s) and to take part in other scheduled activities such as firearm safety, horsemanship, archery, low ropes, physical activity/exercise and related activities under the supervision of instructors; subject to limitations noted herein. I hereby give permission to the medical staff person selected by the event/activity director to order X-rays, routine tests and treatment for my child (or for myself if I am a participant over 18 years old) as medically necessary. I also give permission for the participant to receive overthe-counter medication as needed under the guidance of the medical staff person. I understand that all attempts will be made to notify parents/guardians of any serious injury or illness to their child. If I cannot be reached in an emergency, I hereby give permission to the medical staff |
| 3. | Is the participant experiencing any current health problems, under medical care, receiving mental or behavioral services, or currently taking medication? YES NO If YES, please explain: | person to hospitalize, secure proper treatment for, and to order injection and/or anesthesia and/or surgery for me/ or the participant named on this form. This form may be photocopied for use outside of the event/activity location. ADULT PRINTED NAME: |
| 4. | Has the participant undergone surgery, or experienced any injury, illness, allergy, or change in health status any time during the last year? Is there any reason that participation in a program or activity should be restricted? YES NO If YES, please explain: | SIGNED: X |
| 5. | What else should we know about your child? | I understand and agree to abide with any restrictions placed on my activities according to this form. |
| | 4-H programs include very rewarding, but sometimes challenging situations. Please inform us of any concerns that may arise related to your child's physical, mental, emotional, and/or social health in order that we may better provide appropriate supervision and support. | YOUTH PRINTED NAME: SIGNED: X |
| | MUNIZATION HISTORY (This must be completed) | t recent totanua chat: (month/soor) |
| | e your child's immunizations up to date? YES NO Date of most LEASE AUTHORIZATION | t recent tetanus shot: (month/year)/ |
| I gi | ve permission to the following individual(s) to pick up my child at the conclus | |
| | me(s):, n below at time of pick up (Receiving person must be pre-listed above): | |
| ı ` | me (print): Signature: | Date: |
| | | |



Publication 4H-164NP

VIRGINIA 4-H STANDARDIZED CODE OF CONDUCT FOR 4-H PROGRAMS/EVENTS

Purpose

The purpose of the 4-H program is the positive development of youth. We believe in creating a safe learning environment that encourages the four-fold development of a young person (i.e., Head, Heart, Hands, and Health). We expect all persons involved in 4-H (youth members, parents, teen/adult volunteers) to practice behaviors that foster the total development of youth. Each 4-H member and associated individuals participating in 4-H activities must accept the responsibility of creating a positive image that reflects 4-H ideals. Furthermore, the Virginia 4-H program recognizes that "CHARACTER COUNTS!" All 4-H participants are representatives of the program and should always strive to uphold the following standards: Trustworthiness, Respect, Responsibility, Fairness, Caring, and Citizenship. In seeking uniformity in the conduct expected at 4-H programs/events, the following code of conduct has been developed to provide a clear understanding of expectations. Participants and parents/guardians must sign this form in order to participate.

Code of Conduct

- 1. For the safety and wellness of all participants, a completed and signed 4-H Health History Report Form is required for participation in 4-H events. In addition, medications and medication forms (for all participants under 18 years old) must be turned in at the registration table upon arrival at the 4-H event (or according to another system outlined in the registration/orientation information).
- 2. Participants should attend and be actively involved in all scheduled activities as part of this 4-H program/event (unless under the supervision of a medical staff person.) Curfew is to be followed as specified in the schedule for overnight events. Failure to be in assigned locations may lead to dismissal from the 4-H event. Some areas are off-limits to participants (ex: swimming pool; bodies of water such as lakes and rivers; challenge course, etc.) unless under appropriate instructor supervision.
- 3. Visitors to a 4-H program/event must check-in with the Extension Agent, Program Director, or other adult in charge of the 4-H program/event upon arrival.
- 4. Participants should remain at a 4-H program/event until the program/event is scheduled to end. Participants may not leave a 4-H program/event without prior permission from Extension Agent, Program Director, or other adult in charge of the 4-H program/event. Participants may only be picked up from a 4-H program/event by the person designated on the 4-H Health History Report Form. Identification may be requested at the time of pick-up.
- 5. Participants are expected to follow the directions of 4-H volunteers and paid staff. All 4-H'ers are under the supervision of the Extension Agent, Program Director, or other adult 4-H leader responsible for the 4-H program/event.
- 6. Participants should respect the property of others and be responsible for themselves. Deliberate destruction or removal of facilities or equipment is not permitted. Financial responsibility for any damages caused by deliberate destruction will be assumed by the participant and/or parents/guardians. The same applies to the property and personal items of other participants.
- 7. Participants should treat all others and themselves with respect. Aggressive, abusive, vulgar, or violent language and behavior towards others (ex: fighting, threats, insults, cursing, discrimination, etc.) are not permitted.
- 8. Participants should respect the privacy of others. Girls are not permitted in boys' lodging rooms nor are boys permitted in girls' lodging rooms.
- 9. Participants are expected to dress appropriately based upon the guidelines established by the person in charge of the 4-H program/event.
- 10. Possession, distribution, or use of fireworks, weapons, knives, or other items that can be used as a weapon are not permitted at 4-H programs/events, except under adult supervision in scheduled instructional activities (ex: shooting education class supervised by a certified instructor, etc.).

*18 U.S.C. 707

- 11. Possession, distribution, or use of alcoholic beverages, illegal drugs, tobacco products, and unauthorized prescription drugs are not allowed at any 4-H sponsored program/event and must be reported to law enforcement. The Virginia 4-H program reserves the right to conduct a search of a participant's outer clothing, luggage, personal belongings, lodging rooms, and furniture being used by a participant(s) if there is "reasonable suspicion" that the participant has drugs, alcohol, or weapons.
- 12. Animals and pets are not allowed at 4-H programs/events unless needed to accommodate a disability or as part of an organized program, or through specific authorization from Extension Agent, Program Director, or other adult in charge of the 4-H program/event. Animals that are used as part of a 4-H program/event should always be provided with proper care.
- 13. Electronic and mechanical devices (ex: cellular phones, pagers, walkie-talkies, video games, radios, CD players, TV's, laptop computers, etc.) are not allowed at 4-H programs/events unless they are needed as part of an organized 4-H program/event, or with authorization from the Extension Agent, Program Director, or other adult in charge of the 4-H program/event. Without authorization, these items will be confiscated and returned to the participant (or the participants' parents/guardians) at the end of the program/event.

Consequences

Unacceptable behavior during a 4-H program/event (as defined within this **Virginia 4-H Standardized Code of Conduct** or through a review process by 4-H staff/volunteer) will result in consequences to the participant. Consequences may include:

- 1. early release from this 4-H program/event without refund,
- 2. restitution or repayment of damages,
- 3. denial of future participation in the 4-H program/event at the local, district, state and national levels for one or more years (as determined by the unit staff in charge of, or responsible for, the 4-H program/event).
- 4. forfeiture of financial support for a 4-H program/event
- 5. removal from 4-H offices held (if applicable), and
- 6. releasing the youth to the appropriate law enforcement agency and/or the proper authorities.

NOTE: Any conduct not specifically covered by this **Virginia 4-H Standardized Code of Conduct**, but deemed inappropriate by those responsible for the 4-H program/event will be viewed as a violation and appropriate action will be taken. If an infraction occurs, the person in charge of the 4-H program/event will provide appropriate communication to parents/guardians.

<u>Signature(s)</u> (Both signatures are required for participants under 18 years old.)

I have read and understand the above "Code of Conduct" and will abide by the expectations described in the

| Code-of-Conduct. I understand that if I act inappropriately I will have to act that may result in the consequences listed above. | cept responsibility for my actions |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Participant Printed Name | |
| Participant Signature | Date |
| I have discussed and reviewed this "Code of Conduct" with my child. I und this 'Code of Conduct' may result in the consequences listed above which that this code is violated, I agree to come to the 4-H program/event to pict adult in charge of the 4-H program/event. I further understand that I refuse unavailable, or fail to make timely arrangements to retrieve my child, 4-H law enforcement or social services to provide necessary protection for a cacknowledge responsibility for all fees/charges that may result from said services. | n includes no refund. In the event k up my child at the request of the e to pick up my child, am program/ event staff may contact child in need of services. I |
| Parent/Guardian's Printed Name (for participant under 18 years old) | |
| Parent/Guardian's Signature (for participant under 18 years old) | Date |



Virginia Cooperative Extension



REVISED 2009 PUBLICATION 388-036

8 U.S.C. 707

4-H Event Medication Form

INSTRUCTIONS: Please complete this form for <u>all medication(s)</u> your child will be taking as needed, *including* over-the-counter medications for headaches or cold, inhalers, etc.

NOTE: This form must accompany your child to the 4-H event **only if** he/she is taking any medication. **Please read the following information** related to the "Medication Policy." Your signature below indicates that all information provided on this form is correct and you understand the 4-H center medication policy.

Medication Policy

- ✓ Youth under 18 years old will not be allowed to keep ANY medicines with them.
- ✓ All medications submitted at the 4-H event registration <u>must</u> be in the **ORIGINAL CONTAINER** with the youth's (or teen's) name <u>printed on the bottle</u>.
- ✓ Zip-lock bags, other bottles, bottles printed with someone else's name, or any other type of container besides the original, will not be accepted.
- ✓ Actual dosage listed on the bottle must be followed <u>unless</u> there is a written note from the prescribing doctor outlining different indications.

THERE WILL BE NO EXCEPTIONS TO THIS POLICY.

| I have read and understand the above policy. | | | | | |
|----------------------------------------------------|--------------|----------------|----------|--------|---------|
| Parent/Guardian initials: | Date: | : | | _ | |
| Member's Name: | | | | | |
| Parent/Guardian Phone: (Day) | (Evenin | g) | | | |
| Medication Name (include any special insturctions) | As Needed | Break- fast | Lunch | Dinner | Bedtime |
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| FOR ADDITIONAL MEDICATIONS ATTACH | ADDITIONAL C | OPIES O | F THIS P | AGE. | , |

Medication Release

(Do not sign this line until you pick your child up from the event.)

My signature below indicates that I have picked up all medications from the 4-H staff person following the completion of the 4-H event.

| Parent/Guardian Signature: | Date: |
|-----------------------------|-------|
| r arent eaararan ergratare: | |



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Produced by Communications and Marketing, College of Agriculture and Life Sciences, Virginia Polytechnic Institute and State University

