

Texas 4-H and Youth Development
Commitment to Excellence

I will exhibit traits of a person with character including trustworthiness, respect, responsibility, fairness, caring and citizenship.

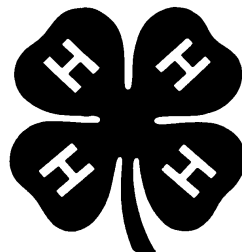
It is my attitude at the beginning of any project that will affect its successful outcome.

It is impossible to succeed without others, and it is my attitude toward other individuals that will determine their specific attitudes toward me.

Nothing can be gained by thinking negatively; therefore, I will think positively. We become what we think. I will not talk about negative ideas or gossip.

I must develop personal pride in what I am, what I do, what I say, how I act; and I must remember the destructive function of false pride.

Nothing of consequence was ever accomplished without cooperation, optimism, perseverance and enthusiasm: it is contagious when it is real, urgent, honest, human and my own!



Signature: _____

Texas 4-H and Youth Development
2003-2004 Code of Conduct

General Behavior

1. I am expected to attend all sessions that are part of the planned program for all activities. I will inform staff if I am not feeling well or have a schedule conflict.
2. I will dress appropriately to the occasion and adhere to any attire requirements stipulated for the event I am attending. 4-H members should be courteous, clean, and possess good manners.
3. Language must be controlled and appropriate for a 4-H member - no swearing.
4. Except for planned tours and outings, I will not leave the activity facilities any time without permission of the chaperone and/or staff responsible for the event.
5. I will not smoke or use tobacco products at any 4-H program event.
6. I will not use alcohol, drugs (except those directed by a doctor), or be associated with or remain in the presence of others when they are being used.
7. I will not carry or threaten another person with a weapon, bodily force or language.
8. I will respect the rights of privacy of those attending an activity and those that I may be rooming with.
9. I will observe hours established by the staff and be in my room. No boys in girls rooms, no girls in boys rooms.
10. I will avoid unnecessary roughness to room furnishings, furniture, equipment, etc. Towels, ashtrays, etc., are not to be taken as souvenirs. Occupants of a room or conveyance are financially responsible for any damage or results of misconduct.
11. Any participant at an official 4-H activity who observes a breach of code of conduct has the responsibility and obligation to report the misbehavior to appropriate chaperones.
12. In the event that photographs, slides, web pages and/or videotapes are made of the undersigned, I/we consent to the release of those photographs, slides, web pages and/or videotape for use in promoting the Texas 4-H and Youth Development Program.

Signature: _____

SS#: _____

County: _____

District: _____

Home Phone: _____

Texas 4-H and Youth Development Consequences of Misbehavior

VIOLATORS MAY EXPECT:

To have the opportunity to explain actions to the professional Extension staff in charge.

Behavior that is disruptive to the event will be documented and a letter describing such will be sent to the District 4-H Leadership Team, County Extension Agent(s) and parents/guardians of those involved. Examples of offenses are as listed below, but not limited to:

Minor Offenses

1. *Habitually late to program activities*
2. *Not in room at designated time*
3. *Not possessing good manners and using language that is offensive to others*
4. *Not respecting the rights and privacy of those rooming with or attending an activity.*
5. *Lying or untruthfulness to chaperones, leaders, event organizers or others in attendance.*

Intermediate Offenses

1. *Inappropriate visitation*
2. *Leaving a 4-H activity without the permission of staff member(s) in charge*
3. *Intentional damage to meeting site, sleeping quarters, person, or other person's property*

Major Offenses

1. *Smoking or using tobacco products.*
2. *The use of alcohol or drugs.*
3. *Carrying an unauthorized weapon.*
4. *Threatening another person with a weapon or bodily harm.*
5. *Cheating*
6. *Sexual activities*
7. *Theft of any kind*

Consequences

C For every offense 4-H member will receive a verbal reprimand.

C For every offense the violator shall write letters of apology to the appropriate people.

Major Offenses

• Automatic removal from event/activity and/or sending a participant home at the parents/guardians expense.

C Two major offenses during any 4-H year is automatic suspension of membership in all Texas 4-H and Youth Development programs for the remainder of the 4-H year, along with the possibilities of facing criminal charges, pending offense. In addition, 4-H member may be asked to resign from all 4-H offices or leadership roles held or give up monetary awards or scholarships from the Texas 4-H program.

Intermediate Offenses

C One or two violations is grounds for removal from the event/activity and/or sending a participant home at the parents/guardians expense.

C Three violations during one calendar year is grounds for the 4-H member to not be allowed in any county, district or state activities for the remainder of the 4-H year. In addition, 4-H member may be asked to resign from all 4-H offices or leadership roles held or to give up monetary awards or scholarships from the Texas 4-H program.

Minor Offenses

C Consistent discipline problems requiring more than two reprimands is grounds for sending a 4-H member home at the parents/guardians expense.

C Habitual discipline problems requiring more than four reprimands during one calendar year is grounds for the 4-H member to not be allowed in any county, district or state activities for the remainder of the 4-H year. In addition 4-H member may be asked to resign from all 4-H offices or leadership roles held or to give up monetary awards or scholarships from the Texas 4-H program.

Course Of Action

Event managers responsible for 4-H events and activities are encouraged to communicate to 4-H participants and adult chaperones prior to the event a standard of acceptable behavior, via the Commitment to Excellence. Standards of behavior and consequences should be reviewed with participants as part of the initial orientation.

1. Event Manager obtains all the relevant facts.
2. Brief the on-site adult responsible for the youth delegate (Extension faculty member or 4-H volunteer)
3. If not on-site, but available via phone, brief the county Extension faculty member and District Extension Director responsible.
4. Review consequences of misbehavior. The following steps should be taken when sending a 4-H member home:

*Extension faculty member contacts parents.

*Parents advised that child is being sent home by safest, most direct means, and that parents are responsible for cost.

*Event manager decides if parents should be given the option of picking up the child.

*County Extension faculty member collects money from parent to pay transportation charges.

*Follow-up correspondence from event's manager to appropriate county Extension faculty member, District 4-H Leadership Team, child and parent for documentation.

5. For all reprimands a Summary Letter and Accident/Incident Report Form will be completed and mailed to the 4-H member, parent, County Extension Agents, District Extension Director, County Extension Directors (if applicable), District 4-H Specialist and the Assistant Directors for 4-H and Youth and County Programs. Additionally, notification will be made to District 4-H Leadership Team prior to letter and form being mailed.

I have read the Texas 4-H Commitment to Excellence and understand what violators may expect. I agree with the Code of Conduct and do intend to abide by it throughout my 4-H activities. I have reviewed and understand the Consequences of Misbehavior.

4-H Member's Signature

County

District

Date

As the parent or guardian of _____, I have read the commitment and do support all points. I give permission to the professional Extension faculty in charge to carry out the Code of Conduct as described including inspection of rooms.

Parent or Guardian

Date

MINOR'S RELEASE AND HEALTH HISTORY FORM

INSTRUCTIONS: Complete the entire form and bring with you to the Texas 4-H Center. This form will be turned in with any medication you bring, both prescription and non-prescription, to the health room upon your arrival.

District _____ County _____ Program Date _____

Name _____ Male _____ Female _____

FIRST

LAST

Address _____ Date of Birth _____ Age _____

City _____ State _____ Zip Code _____

Parent or Guardian _____

Home Phone _____ Work Phone _____

Relative or neighbor to be contacted in case parent or guardian cannot be reached in an emergency:

Name _____ Phone _____

Physical Limitations or Handicaps _____

SPECIAL MEDICATIONS are being sent with minor in quantity to meet his/her needs during camp. ___ Yes ___ No

If YES, list the name of the drug(s) and/or medication, along with the name and phone number of the prescribing physician, dosage, consumption rate and interval: _____

Please check "over the counter" medications which camp personnel may administer as deemed necessary:

___ Acetaminophen (Tylenol) ___ Motrin (Ibuprofen) ___ Pepto Bismol ___ Imodium
___ Neosporin ___ Benadryl ___ Calamine/Caladryl ___ Any As Needed

Special Dietary Needs or Conditions: (i.e. Food Allergies, Diabetes, etc.) If notified in advance, the Center is happy to accommodate any special needs. _____

Health History: (Please check any of the following that apply)

___ Frequent Ear Infections ___ Heart Defect/Disease ___ Convulsions ___ Diabetes ___ Bleeding/Clotting Disorders

Allergies: ___ Hay Fever ___ Insect Stings ___ Penicillin ___ Ivy Poisoning

___ Other _____

Operations or Serious Injuries (List along with approximate date): _____

Chronic or Recurring Illness: _____

Name of Family Physician: _____ Phone: _____

Medical Insurance Carrier: _____ Policy Number: _____

Are your immunizations current and on record at your school? ___ Yes ___ No

Date of last Tetanus Immunization: _____

Parent/Guardian Signature

Date

The Texas 4-H Center considers this privileged information. It will be used for medical reasons only.

**TEXAS 4-H CENTER
MINOR'S RELEASE**

:::SPECIAL NOTE:::

**Please leave prescriptions in original container!!!
Please send only enough prescription medication (pills/tablets) to last length of camp!!!**

I, or we, parent(s) or guardian(s) of a minor child named _____ do hereby give consent for said minor child to participate in all activities other than swimming, sailing, or canoeing scheduled as part of the Texas 4-H Center program to be conducted at the Texas 4-H Center, RR 1, Box 527, Brownwood, Texas 76801: Phone (915) 784-5482. Activities include riflery, archery, initiative games, crafts, and environmental education. Children will be attending parties, ceremonials, and other activities during their stay.

I/we do further give consent for said minor child to participate in organized swimming, canoeing and sailing activities conducted at the Texas 4-H Center. I/we understand that said minor child shall be required to take an approved swimming skill level test and will be assigned to that portion of the swimming area which is commensurate with his or her demonstrated swimming ability. An approved swimming skill level test will also be required before said minor child can participate in the canoeing or sailing program.

_____ Yes _____ No

In the event that photographs, slides, or video tapes are made of said minor child, I/we consent to the release of those photographs, slides and video tapes for use in promoting programs at the Texas 4-H Center.

_____ Yes _____ No

I/we do further give consent for said minor to participate in scheduled field trips during this program. I/we understand that only approved adult volunteers and/or staff will transport said minor off the Texas 4-H Center grounds and will serve as a chaperone for the field trip.

_____ Yes _____ No

I/we further give permission to have emergency first-aid administered by any qualified person in case of illness and/or injury to said minor child and to have said minor child transported by the most expedient means of conveyance to the nearest physician, hospital, or clinic and to there receive such treatment as is medically prescribed by physician(s). Further I/we, do hereby authorize the release of medical records by hospital, clinic, and/or physician for the purpose of filing insurance claims. In case of extreme illness and/or injury, I/we do further agree that the Texas Cooperative Extension and the Texas 4-H Youth Development Foundation, their employees or agents, individually or collectively, shall not be held responsible or liable for personal injury or loss resulting either on the premises of the Texas 4-H Center or en route to or from the Texas 4-H Center.

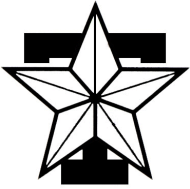
Further, I/We do hereby authorize the Texas 4-H Center to release said minor child to the following person/people at the conclusion of the activity:

Signature of Parent or Guardian

Further, I/We require that said child not be Released to the following person/people at the conclusion of the activity:

Date

PLEASE READ CAREFULLY AND FILL IN ALL APPROPRIATE SPACES



WAIVER & RELEASE OF CLAIMS and INDEMNIFICATION AGREEMENT (with Authorization For Medical Care)



This authorization covers _____ during his/her travel to and participation in _____
_____, a 4-H event. This activity covers the period _____ through _____.

I (releasor/indemnitor), the undersigned parent/legal guardian of the above-mentioned 4-H member (participant), authorize his/her participation in this event. It is my understanding that participation in the activities that make up this event is not without some inherent risk of injury. In consideration of participant's involvement in this event, I hereby release, waive, discharge, and covenant not to sue the sponsor of this event, the State of Texas, The Texas A&M University System, the Board of Regents of the System, Texas A&M University, the Texas Cooperative Extension, the Texas 4-H & Youth Development Program, or any employees or agents of these entities (releasees/indemnities), from any and all liability, claims, or causes of action whatsoever arising out of or related to any loss or injury, including death, that may be sustained by participant, including claims arising from the negligence of releasees. I further agree to defend, hold harmless and indemnify indemnitees from any and all claims and causes of action as a result of participant's involvement and actions at this event, including claims and causes of action arising from the negligence of indemnitees. The foregoing agreements are effective while traveling to and from the event, and while participating in the event and on premises where the activity is being conducted.

I give my permission for participant to be treated for condition requiring emergency medical care, as determined by a health care professional, and accept responsibility for the cost of the treatment. I agree to defend, hold harmless and indemnify indemnitees for any expenses incurred in treating participant. In case of sudden illness or accident to participant, either at the event or traveling to or returning from the event, I authorize Texas Cooperative Extension personnel serving as chaperones to take reasonable action to protect the health and physical well-being of participant. I understand a medical policy carried by American Income Life, if any, may be available to pay certain medical expenses related to treatment of participant. The following information is provided as an aid to the chaperones in dealing with the well-being of participant.

Signature of Parent/Guardian

Date