RUTGERS
New Jersey Agricultural Experiment Station

New Jersey 4-H Release/ Agreement Form for Adults

4H103

Both sides of this form must be completed and signed by all adults participating in 4-H overnight activities, field trips, and events requiring group transportation where youth are present, or any other events sponsored through the 4-H Youth Development Program as determined by the event coordinator. The form should be submitted prior to the event.

Information about the Adult Participant and Activity

Name of Adult participant: _____

Address: _____ City:_____ State:_____Zip:_____

Telephone number: _____ Email Address: _____

4-H county: _____ Have you gone through the appointed volunteer process? ☐ Yes ☐ No

Name of activity/event: _____

Name of 4-H group sponsoring or participating in this event: _____

Location of event: _____

Date and time of participation of individual named above: _____

Release of Liability

Although Rutgers Cooperative Extension and its event coordinator(s) will use the utmost precaution in guarding the health of all participants and preventing accidents, I release them and their Cooperating Agencies: Rutgers, The State University of New Jersey, U.S. Department of Agriculture, and County Boards of Chosen Freeholders, from any liability in case of injury as a result of this activity. Furthermore, I release the owner and driver of the car transporting me to and from this event, from any liability in the case of illness or injury.

Sign Here **Signature of adult participant** _____

Medical Emergency Authorization and Health Information

In case of sudden illness or an accident to myself requiring immediate treatment or surgery while I am a participant in this activity, I authorize the 4-H event coordinator or other adults present to take such action as seems appropriate to protect my health and physical well-being. This authority extends to any physician(s) and/or surgeon(s) selected to perform medical and/or surgical procedures including examinations and tests necessary to preserve my life and well-being. All efforts will be made to contact the individual named as my emergency contact above in case of emergency.

_____ _____ _____ _____

Name of emergency contact **Phone number** **Name of additional emergency contact** **Phone number**

The following information is provided as an aid to the event coordinator in dealing with my well-being. I have the following conditions (include allergies, handicaps, diabetes, pregnancy, asthma, medications needed, etc.):

Health conditions: _____

Medications/Instructions: _____

Health Insurance: Company Group# _____ ID# _____

Sign Here **Signature of adult participant** _____

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New Jersey 4-H Code of Conduct

The primary purpose of the New Jersey 4-H Code of Conduct is to ensure the safety and well-being of all participants at 4-H sponsored events and activities. It applies to all participants, with participants defined as 4-H members, their parents, and volunteers.

As a participant in the 4-H program, I will:

- **Conduct myself in a courteous manner and treat members, parents, 4-H volunteers, Extension staff, judges and others with respect. Appropriate language and behavior are expected at all times.**
- **Respect and adhere to the rules and guidelines of the 4-H program including all those specific to a 4-H event or activity.**
- **Uphold an individual's right to dignity by supporting an environment of inclusion which welcomes involvement of participants from all backgrounds.**
- **Accept supervision and support from county and state 4-H staff while participating in the 4-H program. This includes acceptance of supervision and support from appointed 4-H volunteers coordinating 4-H events and activities.**
- **Obey local, state and federal laws.**

Participants who fail to adhere to the New Jersey 4-H Code of Conduct are subject to a range of disciplinary actions. Such actions will be taken in compliance with the New Jersey 4-H Discipline Policy and Procedure. When appropriate, immediate corrective action will be taken at the 4-H event to ensure the safety and welfare of all participants.

I understand if I fail to adhere to the above Code of Conduct, I will be subject to disciplinary action and potentially prohibited from attending and participating in the New Jersey 4-H Youth Development program.

Sign Here _____ _____

Signature of participant **Date**

New Jersey 4-H Media Policy and Release

The 4-H program routinely promotes activities through various media. This includes, but is not limited to newsletters, newspapers, brochures, and displays. In doing so, the names and photos of members may be included to help tell the 4-H story. However, New Jersey 4-H policy is that on web sites, youth in photos will not be identified by name(s).

❑ **No, do not use my individual picture for any purpose.** I will make an effort to avoid opportunities to be in group photos.

❑ **No, do not use my name for any purpose.**

Revised: January 2013, December 2019, 2021

Cooperating Agencies: Rutgers, The State University of New Jersey, U.S. Department of Agriculture, and Boards of County Commissioners. Rutgers Cooperative Extension, a unit of the Rutgers New Jersey Agricultural Experiment Station, is an equal opportunity program provider and employer.