



Mini 4-H Enrollment Form

4-H Year 2017 - 2018

(Please Print)

County: _____ Correspondence Preference Postal Mail Email

Family Name _____ Family Email _____

Email (If different than family email) _____ First Name _____

Middle Name _____ Last Name _____

Suffix _____ Preferred Name _____

Mailing Address _____ Mailing Address 2 (if applicable, Apt #) _____

City _____ State _____

Zip Code _____

Birth Date (mm/dd/yyyy) _____ Gender Male Female

Primary Phone () _____ Cell Phone () _____ I would like to receive text messages

Cell Phone Provider (if you want to receive text messages) _____ Years in 4-H: _____

Parent/Guardian 1

First Name _____ Last Name _____

Cell Phone _____ Work Phone _____

Parent/Guardian 2

First Name _____ Last Name _____

Cell Phone _____ Work Phone _____

Address(if different than family address) _____ Address 2 _____

City _____ State _____

Zip Code _____ Home Phone _____

Email (If different than family email) _____

Second Household (if applicable)

Send Correspondence Yes No Correspondence Preference Postal Mail Email

Second Household Family Last Name _____ Primary Phone _____

Address _____ City _____

State _____ Zip Code _____

Email _____

Emergency Contact

Name _____ Phone _____

Cell Phone _____ Relationship _____

Ethnicity	Are you of Hispanic ethnicity? <input type="checkbox"/> No <input type="checkbox"/> Yes (please indicate both an ethnicity and a race)	
Race (check all that apply)	<input type="checkbox"/> White	<input type="checkbox"/> Native Hawaiian or Pacific Islander
	<input type="checkbox"/> Black	<input type="checkbox"/> Asian
	<input type="checkbox"/> Native Indian or Alaskan Native	<input type="checkbox"/> Prefer Not to State
Residence	<input type="checkbox"/> Farm (rural area where agricultural products are sold)	<input type="checkbox"/> Suburb of city more than 50,000
	<input type="checkbox"/> Town under 10,000 and non-farm	<input type="checkbox"/> Central city more than 50,000
	<input type="checkbox"/> Town/City 10,000 – 50,000 and its suburbs	
Military	<input type="checkbox"/> No one in my family is serving in the military	<input type="checkbox"/> I have a parent serving in the military
	<input type="checkbox"/> I have a sibling serving in the military	
Branch	<input type="checkbox"/> Air Force <input type="checkbox"/> Army	<input type="checkbox"/> DOD Civilian <input type="checkbox"/> Marines <input type="checkbox"/> Navy
Component	<input type="checkbox"/> Active Duty <input type="checkbox"/> National Guard	<input type="checkbox"/> Reserves
School County	School District	
School Name		
School Type	<input type="checkbox"/> Public	<input type="checkbox"/> Homeschool/Alternative
	<input type="checkbox"/> Private	<input type="checkbox"/> Magnet/Specialized School
	<input type="checkbox"/> Special Education	<input type="checkbox"/> Charter School
	<input type="checkbox"/> Vocational	
Grade in School as of October 1, 2017		

Authorizations

4-H Youth Development Liability Release

I understand that participating in 4-H activities can involve certain risks to my child. On behalf of my child I accept those risks. I hereby release and discharge Purdue University, The Trustees of Purdue University, the County Commissioners, the County Cooperative Extension Service, and each of their trustees, officers, appointees, agents, employees, and volunteers ("Released Parties") from all claims which my child or I might have for any injury or harm to my child, including death, arising out of my child's participation in any activity related to the 4-H youth development program, even if such injury or harm is caused by the negligence or fault of any of the Released Parties. I do not, however, release these individuals and entities from liability for intentional, willful or wanton acts and this release shall not be construed to include such acts.

- We have read and agree to the terms.

Parent/Legal Guardian Statement

I (we) understand, agree to abide by, follow, and comply with the rules, policies and expectations of the 4-H program and will conduct myself (ourselves) in a courteous and respectful manner by exhibiting good sportsmanship and being a positive role model for youth. I (we) also understand that failing to do so will constitute grounds for sanctions and/or dismissal of the member from the program.

- We have read and agree to the terms.

Photo Policy Statement

I (we) grant permission to the 4-H Youth Development program to use videos or photographs of my (our) child for educational purposes or promotion of 4-H and/or Purdue Extension programs.

- I agree to the photo policy statement
 I do not agree to the photo policy statement

We have read and completed all required authorization sections above.

Member Signature: _____ **Date:** _____

Adult Signature: _____ **Date:** _____