



# REGISTRATION FORM



Sign front and back plus, return the  
Medical Release Form (requires notarization)

Name (**one form per child**): \_\_\_\_\_

Parent's or Guardian's Name(s):

\_\_\_\_\_

Primary Contact Address:

\_\_\_\_\_

Home Telephone: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

E-Mail: \_\_\_\_\_ (for updates regarding your Super Summer workshops)

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Gender: ☐ Male ☐ Female

Ethnic Group: A. Choose One: ☐ Non-Hispanic or Latino ☐ Hispanic or Latino

B. Choose All that apply:

☐ White or Caucasian ☐ Black or African American ☐ American Indian or Alaska Native  
☐ Asian ☐ Native Hawaiian or other Pacific Islander ☐ Other: \_\_\_\_\_

Do you live:

☐ Farm ☐ Town under 10,000 people or rural non-farm ☐ City 10,000-50,000

Allergies/concerns: \_\_\_\_\_

Emergency Contact

Information: \_\_\_\_\_

My child is currently a 4-H member:

\_\_\_\_ Yes \_\_\_\_ No

I would like to chaperon some trips/tours/workshops:

\_\_\_\_ Yes \_\_\_\_ No

I would like to enroll my child in a 4-H club:

\_\_\_\_ Yes \_\_\_\_ No

**Please sign me up for the following workshops:**

**Title:**

**Date**

**Fee:**




**Total Enclosed \$ \_\_\_\_\_**

1. Make checks payable to *Watauga County 4-H*.
2. All fees are NON-REFUNDABLE unless an activity is canceled.
3. All fees must be paid in full upon registration.

Please complete and deliver this form with your check to:

971 West King Street  
Boone, NC 28607  
(828) 264-3061

(Please sign media release on next page)

### **Media Release**

**A parent or guardian should sign below whichever statements you wish to apply to the youth's involvement in 4-H programs.**

\_\_\_\_\_ I agree to allow 4-H to take photographs of my child for use in 4-H and other N.C. Cooperative Extension educational, promotional, and/or marketing materials. Neither individual addresses nor telephone numbers will be published within these materials.

\_\_\_\_\_ I do not wish for 4-H to take photographs of my child for use in 4-H or N.C. Cooperative Extension educational, promotional or marketing purposes.

### **Registration Information**

**We are going to have great fun with 4-H! Now, for all the paperwork and logistics!**

**Please sign and notarize the Medical Information form (separate)  
*Sign the Media release (above)***

We have a safe program, but here is information about the risks of participating:

Your child will be participating in a variety of activities with the 4-H Super Summer program. Such activities can involve the risk of injury. Depending on the workshops you signed up for, your child:

- \*will work with gardening tools, woodworking tools, electrical tools, and kitchen tools, appliances and equipment;
- \*may play on playground equipment or be on climbing/ropes courses;
- \*may be in direct contact with animals and insects;
- \*may be around water, such as a pond or stream.
- \*outdoor physical activities such as hiking, swimming, climbing could be an injury risk.
- \*other participants may act in a way that could injure your child.

On tour days, your child:

- \*will be riding in a 12 passenger van or other vehicle driven by an Extension employee; (Situations may arise where your child may travel in a volunteer's vehicle.)
- \*will be near traffic/roads/parking areas;
- \*may be around large equipment;
- \*may be at public facilities such as restrooms and gift shops.

Please discuss with your child the importance of following directions and safety procedures, which will be outlined by 4-H professionals/volunteers or by the facilities.

**"This event or activity is operating under the 4-H Code of Conduct and Disciplinary Procedure. You can obtain a copy from your 4-H Office. This 4-H Code of Conduct and Disciplinary Procedure is a condition of participation in any North Carolina 4-H activities or programs."**