

# WSU 4-H Teen Conference Registration Form

Required fields are notated by an asterisk (\*) and **bold text**. Please fill out the form and email it to **Kelly.a.stewart@wsu.edu**.

This form is valid only for the 2023 Washington 4-H Teen Conference.

## Member Information

\***First Name:** \_\_\_\_\_  
Middle Name: \_\_\_\_\_  
\***Last Name:** \_\_\_\_\_  
Preferred Name: \_\_\_\_\_  
\***Birth Date:** \_\_\_\_\_

## About You

\***Gender:**  
☐ Female  
☐ Male  
☐ Nonbinary  
☐ Gender Identity Not Listed

\***Grade** (for the 2022-2023 school year, circle one):  
8 9 10 11 12 Post H.S Not in School Special

## Demographics

\***Residence**  
☐ Farm  
☐ Town Under 10,000 or Rural – Non-Farm  
☐ Town, City or Suburb More than 50,000  
☐ City or Suburb More than 50,000  
☐ City – Central, More than 50,000

\***Are you of Hispanic or Latino Ethnicity?**  
☐ Hispanic or Latino  
☐ Not Hispanic or Latino  
☐ Prefer not to State

\***Race (check all that apply)**  
☐ American Indian or Alaskan Native  
☐ Asian

- ☐ Black or African American
- ☐ Native Hawaiian or Pacific Islander
- ☐ Other (race not listed)
- ☐ White
- ☐ Prefer not to State

### Emergency Contact

**\*Full Name** \_\_\_\_\_

**\*Relationship** \_\_\_\_\_

**\*Contact Phone** \_\_\_\_\_

Contact Email \_\_\_\_\_

### Additional Questions

#### Parent/Guardian 1 Information

**\*First Name:** \_\_\_\_\_

**\*Last Name:** \_\_\_\_\_

**\*Phone Number:** \_\_\_\_\_

Work Phone Number: \_\_\_\_\_

Work Extension: \_\_\_\_\_

#### Parent/Guardian 2 Information

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_

Work Extension: \_\_\_\_\_

#### Military

- \*Family Member Military Service:**
- ☐ I am serving in the military
  - ☐ I have a family member serving in the military
  - ☐ I have a family member who retired from the military
  - ☐ I have a parent serving in the military
  - ☐ I have a parent who retired from the military
  - ☐ I have a parent who served in the military
  - ☐ I have a sibling serving in the military
  - ☐ No one in my family is serving in the military

## Health Form

Fill out the following information accurately, but please be concise.

If the youth member needs a reasonable accommodation to participate in 4-H events and activities, please see the Member Resources Page (<https://extension.wsu.edu/4h/member-resources>) and fill out the Reasonable Accommodation form found there.

**Note for Youth Members over 18 Years of Age:** Youth members who are age 18 on or before the date these health forms are completed may sign the Medical Release in both the "Member Name" and "Parent/Guardian Name" fields.

### Allergies

**\*Do you have any allergies that are life threatening?**

- ☐ Yes
- ☐ No

If yes, please describe:

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**\*Do you have any additional, non-life-threatening allergies?**

- ☐ Yes
- ☐ No

If yes, please describe:

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**\*Do you have any dietary needs that are not considered an allergy?**

- ☐ Yes
- ☐ No

If yes, please describe:

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### Care

**\*Primary Care Doctor or Preferred Health Provider**

**\*Name:**

**\*Phone:**

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**Secondary Care Doctor or Preferred Health Provider**

**Name:**

**Phone:**

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### Conditions

**\*Are there any health conditions that may affect your ability to participate in 4-H programming as an 4-H Youth Participant?**

- ☐ Yes
- ☐ No

If yes, please describe:

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### Health Insurance

**\*I am covered by family medical and/or hospital insurance:**

- ☐ Yes
- ☐ No

Primary Insurance Company:

Insurance Policy Number:

Insurance Subscriber

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### Remarks

**\*Is there any additional health information that may be important for WSU faculty and staff, and/or Certified 4-H Volunteers to know?**

- ☐ Yes
- ☐ No

If yes, please describe:

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### Medical Release

In an emergency requiring medical attention or a situation reasonably believed to be an emergency by Washington State University (WSU) authorized agents including Certified 4-H Volunteers or event staff, I authorize WSU and its authorized agents to obtain emergency medical care for me and/or my minor child. I will be responsible for any expenses incurred in so doing including, but not limited to, care by health care professionals, hospital care, and ambulance or other services. In addition, the health care provider has permission to obtain a copy of my health record from providers who treat me and/or my minor child and these providers may talk with the program's staff about my/my child's health status. If I am signing this on behalf of my minor child, I certify that I am a legal my child's legal guardian.

**\*Member Signature:**

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**\*Parent Guardian Signature:**

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- ☐ I hold harmless and agree to indemnify Washington State University, its authorized agents, and employees from decisions to seek emergency treatment.

## Consents

Please read the following consents carefully. Choose the appropriate radio button (where available) and digitally sign your agreement to these consents by typing the appropriate name in the corresponding field. **Your signature of agreement is required to participate in 4-H.**

**Note for Youth Members over 18 Years of Age:** Youth members who are age 18 on or before the date these consents are completed may sign the consents in both the “Member Name” and “Parent/Guardian Name” fields.

### 4-H Youth Code of Conduct

As a 4-H youth participant/member you have the responsibility of representing all 4-H members to the public. Therefore, you are expected to conduct yourself in a manner that respects individual rights, safety, and property of others, and reflects favorably on your state, county/tribal program, and club, as well as yourself. You are expected to observe the following guidelines as a participant/member of 4-H.

1. The possession and use of alcoholic beverages, marijuana, and/or drugs other than prescribed medication is prohibited. The use of tobacco products (including vapor products) by youth members is prohibited.
2. Obscene and discriminatory language, roughhousing, and insubordination will not be tolerated.
3. Members and leaders must demonstrate respect for each other and the public.
4. Members are to refrain from public displays of affection or sexual activities at all 4-H functions.
5. Provide an environment that is free of any form of harassment toward other 4-H participants/members, volunteers, or staff.
6. Damage to, or destruction of, property belonging to others is prohibited.
7. Animal abuse of any kind is prohibited.
8. Display of unsportsmanlike conduct is prohibited.
9. Be an example of how to accept what life has to offer – good and bad – and how to live with the outcome of exhibiting your project.
10. Wear neat, clean, and appropriate attire; including shoes, boots, or appropriate footwear at all times.
11. Report any infractions to the superintendent/club leader/event coordinator.

Penalties for infractions(s) may include any or all of the following:

- Placing the member on probation for involvement in further 4-H events and/or termination of 4-H membership.
- Assessing the member the cost of damages and repairs in the event of damage or destruction of property.
- Releasing the member to the nearest law enforcement agency and/or the proper authorities.
- Withholding premiums and/or sending the member home from 4-H activities or events.

All penalties for infractions will be determined by the local Extension 4-H Office. The local 4-H Extension staff/faculty will notify parents/guardians if penalties are necessary.

**For youth & parent/guardians:** We understand this agreement is to ensure the safety of the 4-H youth member and ensure conduct and behavior that will result in each participant receiving the full benefit of enjoyment and educational experience from this 4-H affiliation/event. It is not intended to place undue restrictions upon participants.

**For youth members:** I have read the Code of Conduct and agree to abide by its rules. I understand that infractions of this code will result in any or all of the penalties listed above.

**For parents/guardians:** I have read the code of conduct and understand that I am responsible for my child's behavior. I give permission to the staff in charge to administer the code.

I understand that the local WSU Extension 4-H program may have policies that are more restrictive than the state policies, but not less restrictive. In the event that the 4-H program has additional agreements required for enrollment, a hard copy form will be provided for signature.

**\*Member Signature:** \_\_\_\_\_

**\*Parent Guardian Signature:** \_\_\_\_\_

☐ We agree to the 4-H Youth Code of Conduct.

### Photo, Image, & Voice Recordings Consent

I understand that, unless noted below, WSU Extension and Washington State 4-H may use photos, video, or audio recordings made of me or my enrolled child at 4-H events to promote the 4-H Youth Development Program without compensation. I understand that WSU Extension or Washington State 4-H may reveal my or my child's name in descriptive text or commentary.

**\*Member Signature:** \_\_\_\_\_

**\*Parent Guardian Signature:** \_\_\_\_\_

☐ We agree.

☐ No, we do not agree to use of digital images or voice recordings as set forth above.

### 4-H Assumption of Risk, Release of Liability

Participation in meaningful youth development programs as a volunteer or member has a positive impact on youth by helping build leadership skills, social/emotional development, and resilience in every facet of their lives. In order to take advantage of these benefits, I and/or my child wish(es) to take part in the WSU 4-H Youth Development Program (Program) associated with Washington State University (WSU) as a youth member and/or volunteer.

I understand and agree that there are risks associated with the Program, including risks that the Program and WSU cannot predict or foresee. I understand and agree that my/my child's affiliation with the Program may involve participation in a wide variety of activities such as, but not limited to: club meetings, shows, clinics, working with animals, physical education activities, shooting or archery, water-sports, food preparation, woodworking, crafts, and travel. Risks associated with the Program and its activities include, but are not limited to: temporary or permanent muscle soreness, sprains, strains, cuts, abrasions, bruises, ligament and/or cartilage damage, orthopedic damage, head, neck, or spinal injuries, loss of use of arms and/or legs, eye damage, disfigurement, burns, drowning or death. I also recognize that there are both foreseeable and unforeseeable risks of injury or death that may occur as a result of participating in or traveling to or from, Program activities that cannot be specifically listed. Further, I recognize that the actions of other participants in the activity may cause harm or loss to my child, self, or property.

In consideration for and as a condition of being allowed/allowing my child to participate in this voluntary activity, I voluntarily agree to take full responsibility for any and all risks that exist, including the risk of death or injury to my child or self or loss or damage to my property. I understand that there may be risks that the Program and WSU cannot predict or foresee, and I also assume full responsibility for those risks. I understand that the Program and WSU cannot ensure, and is not responsible to ensure, my/my child's safety during my/my child's activities with the Program or travel associated therewith.

I, my heirs and assigns, hereby release, the state of Washington, the Regents of WSU, WSU, any subdivision or unit of WSU, the Program, their officers, employees/volunteers, and agents, from any and all liability, claims, costs, expenses, injuries and/or losses to person or property, which I and/or my child may sustain as a result of, or in connection with, the Program.

If any part or portion of this Assumption of Risk, Release of Liability is determined to be invalid or unenforceable, the remaining parts or portions shall be enforceable. This release and all matters related to my/my child's activities involving the Program and WSU shall be governed by and interpreted in accordance with Washington law. I have carefully read this document, understand its contents, and am fully informed about the Program and circumstances. I am aware that this document is a contract with the Program and WSU and the Program sponsors. I enter this contract freely and voluntarily.

**\*Member Signature:** \_\_\_\_\_

**\*Parent Guardian Signature:** \_\_\_\_\_

☐ We agree.

### Survey and Evaluation Permissions

As a participant in the 4-H Program, you or your child may be asked to help with the evaluation of the program to tell us how well the program is working. You or your child may be asked to complete a written survey about what you/your child learned from participating in the program.



Participating in the evaluation is not required. If you or your child decide not to participate, it will not affect participation in this or future WSU Extension programs. The survey responses will be anonymous, and participant responses will not be identified in any way.

If you do not want to participate in the evaluation of the 4-H Program or you have questions about any evaluation, please contact your local WSU Extension Office.

**\*Member Signature:** \_\_\_\_\_

**\*Parent Guardian Signature:** \_\_\_\_\_

☐ We agree.

## Registration

### Information

#### **Registration**

Registration for 4-H Enrolled youth will be open from April 11, 2023 to May 15, 2023. Registration cost is \$295 for youth participants, \$200 for youth participants who are presenting or who are participating in the planning committee, and \$200 for adult chaperones.

**If you have questions about registering for Teen Conference, please contact Kelly Stewart at [Kelly.a.stewart@wsu.edu](mailto:Kelly.a.stewart@wsu.edu) or 509-339-5500.**

#### **Conference Information**

Please go to the Washington State 4-H Teen Conference webpage here: <https://extension.wsu.edu/4h/stc/> and review conference information and workshop descriptions for the conference before completing your registration.

**\*Mobile Phone Number:** \_\_\_\_\_

**\*Preferred Name** (as it will appear on your nametag): \_\_\_\_\_

**\*T-Shirt Size (unisex adult sizes):**

- ☐ XS
- ☐ Small
- ☐ Medium
- ☐ Large
- ☐ XL
- ☐ XXL
- ☐ XXXL

### Room Information

Youth participants will be roomed in a double occupancy dorm room with another youth of the same gender listed on their enrollment. If you have questions or concerns about this, please contact [Kelly.a.stewart@wsu.edu](mailto:Kelly.a.stewart@wsu.edu). Youth have the option to request a roommate in the space below. Adult chaperones will have single dorm rooms. Dorm rooms have beds without linens. **All participants must provide their own bedding** (sleeping bag).

Preferred Roommate Name: \_\_\_\_\_

### Workshops Information

For each workshop block, choose your first choice (1) and your top two alternate choices (2 and 3). Workshops will be filled based on registration date. \*Note: Some workshops are longer than one workshop period. Please follow the directions in parenthesis when you select workshops.

#### **Wednesday, June 21:**

##### **\*Workshop #1**

	College Prep – Grades 11/12 (Choose for all 4 workshops)
	College Prep – Grades 09/10 (Choose for workshops #1 and #2)
	Communication Skills Gained from Livestock Judging Oral Reasons
	Juntos 4-H (Choose for workshops #1 and #2)
	Crafting Your Profile: A workshop on how to write resumes (Choose for workshops #1 and #2)
	Glow Yoga
	ChatGPT: Quicker Research and Ethical Use
	Google Apps for the College Bound Student (Choose for workshops #1 and #2)

##### **\*Workshop #2**

	College Prep – Grades 11/12 (Choose for all 4 workshops)
	College Prep – Grades 09/10 (Choose for workshops #1 and #2)
	Sausage Making
	Crafting Your Profile: A workshop on how to write resumes (Choose for workshops #1 and #2)
	Juntos 4-H (Choose for workshops #1 and #2)
	Google Apps for the College Bound Student (Choose for workshops #1 and #2)
	Teen Cuisine
	Drone Operations for Facilities Management and Mapping

#### **Thursday, June 22:**

##### **\*Workshop #3**

	College Prep – Grades 11/12 (Choose for all 4 workshops)
	Hearts and Livestock
	Stress Management: Practical tips to prepare for life after high school

	Mentally Preparing for Adulthood
	National 4-H Opportunities
	Sales
	International Exchange
	Think about Your Future

**\*Workshop #4**

	College Prep – Grades 11/12 (Choose for all 4 workshops)
	How to Survive Group Projects
	You're Hired! Practicing Interview Best Practices
	Building a Robot, Building Your Future
	Holding Brave Spaces
	It's All About the Money!
	Effective Presenting for Academics and Beyond
	Teens Helping Teens: A guide to mental and emotional health