2025 CASS COUNTY 4-H ENROLLMENT FORM

**PURDUE/CASS COUNTY EXTENSION OFFICE, 200 COURT PARK, ROOM 302, LOGANSPORT, IN 46947 (574) 753-7750**

# *(All information must be filled in or enrollment will NOT be considered complete!)*

**Indiana State 4-H Program Fee**   **ONLINE ENROLLMENT AT: http://v2.4honline.com** **Members in grades 3-12 pay $15 each with a maximum payment of $45 per family household address.**  Payment options: debit/credit card (online enrollment only), check or cash. Please make checks payable to **Purdue CES Ed Fund**. All youth **MUST** complete an enrollment form (online or paper) with permissions indicated and pay the State 4-H Program Fee to be officially enrolled in 4-H.

 **CORRESPONDENCE PREFERENCE: POSTAL MAIL**  **EMAIL** 

**FAMILY NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAMILY EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**LAST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FIRST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MIDDLE NAME/INITIAL\_\_\_\_\_\_\_\_\_\_\_\_\_ PREFERRED NAME\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MAILING ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_\_\_\_\_ ZIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BIRTHDATE (mm/dd/yyyy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GENDER: MALE**  **FEMALE**  **COUNTY OF RESIDENCE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PRIMARY PHONE ( ) \_\_\_\_\_-\_\_\_\_\_\_\_\_\_ CELL ( ) \_\_\_\_\_-\_\_\_\_\_\_\_\_\_ EMAIL (if different than family email): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ I WOULD LIKE TO RECEIVE TEXT MESSAGES**  **CELL PHONE PROVIDER (if you want to receive text messages) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***PARENT/GUARDIAN 1: PARENT/GUARDIAN 2:***

 **FIRST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ LAST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FIRST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ LAST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **MAILING ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MAILING ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **PHONE ( ) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_WORK ( ) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE ( ) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_WORK ( ) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **CELL ( ) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_ EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CELL ( ) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_ EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SECOND HOUSEHOLD: Send Correspondence? Yes**  **No**  **Correspondence Preference: Mail**  **Email** 

**SECOND HOUSEHOLD FAMILY LAST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PRIMARY PHONE ( ) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_**

**MAILING ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_\_\_\_\_ ZIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMERGENCY CONTACT: NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ RELATIONSHIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE ( ) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CELL ( ) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**VOLUNTEER:** Are you a Youth member serving in a leadership role (Junior Leader, Youth Representative to a County 4-H Committee, etc.)?  No  Yes **ETHNICITY:** Are you of Hispanic ethnicity?  No  Yes

**RACE (circle all that apply)**: White, Black, Native Indian/Alaska Native, Native Hawaiian/Pacific Islander, Asian, Prefer Not to State

**RESIDENCE:**  Farm  Town under 10,000 and non-farm  Town/City 10,000-50,000 and its suburbs  Suburb of city more than 50,000

  Central City more than 50,000

**MILITARY:**  No one in my family is serving in the military  I have a parent serving in the military  I have a sibling serving in the military

 **Branch:**  Air Force  Army  DOD Civilian  Marines  Navy **Component:**  Active Duty  National Guard  Reserves

**SCHOOL:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **SCHOOL COUNTY:** \_\_\_\_\_\_\_\_\_\_\_\_ **GRADE** (as of 10-1-24)**:** \_\_\_\_\_\_ **NUMBER OF** **YEARS IN 4-H (including this year):**\_\_\_\_\_\_\_\_\_

**SCHOOL TYPE** (circle one): Public, Private, Special Education, Vocational, Homeschool/Alternative, Magnet/Specialized School, Charter School

# 4-H Youth Development Liability Release

I understand that participating in 4-H activities can involve certain risks to my child. Those risks may include injury or harm, including, but not limited to, bodily injury, disability, exposure to COVID-19 and other viruses and or illnesses, and death. During virtual 4-H activities, I understand that program staff are not providing supervision for my child during the online program, and the Released Parties do not have control over the information available through the internet or other electronic data sources beyond that which is a part of the 4-H activity. On behalf of my child, I fully assume the inherent risks associated with my child participating in 4-H activities and assert that my child has chosen to participate in this program with my express approval. I hereby release and discharge Purdue University, The Trustees of Purdue University, the Cass County Commissioners, the Cass 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, arising out of my child’s participation in any activity related to the 4-H 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.

**□By checking this box and signing this form, 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 against and/or dismissal of me (us) and/or the member from the program.

 **□By checking this box and signing this form, we have read and agree to the terms.**

# Photo Policy Statement

By participating in Indiana 4-H, I grant permission to the Indiana 4-H Youth Development Program to use videos or photographs of me (my child) for educational purposes or promotion of 4-H and/or Purdue Extension programs. For questions, or to decline this condition, please contact the County Extension Office.

**□By checking this box and signing this form, I agree to the photo policy statement**

 **See Back for Required Signatures**

|  |  |  |
| --- | --- | --- |
| **CLUBS: (CIRCLE ALL 4-H Club(s) in which you are a member)**  |   |  **COUNTY CLUBS:**  |
| **Adams Hoosier Harvestors Clinton Climbers Jefferson Busy Bees** **Bethlehem Helping Hands Harrison Hustlers Jefferson Willing Workers** **Boone Royal Clovers Jackson Friendly Farmers Noble Leaders of Tomorrow**  |  | **Tipton Happy Harvesters Tailwaggers** **Washington Township Hoosier Horsemen**  **Cottontails**  **Straight Shooters** |

**PROJECTS: (\* DENOTES ANIMAL EXHIBITION PROJECT)**

**4-H MEMORY BOOK \_\_\_\_**  **AEROSPACE \_\_\_\_**

**ARTS & CRAFTS - BASIC** (Wood, Reed, Leather, Metal, Enameling, Ceramics) **\_\_\_\_**

**ARTS & CRAFTS – FINE ARTS \_\_\_\_**

**ARTS & CRAFTS – HOLIDAY CRAFT \_\_\_\_**

|  |
| --- |
| **Office Use Only - - Program Fee Payment Date: \_\_\_\_\_\_\_\_\_\_\_ Cash/Check #\_\_\_\_\_\_\_\_\_\_\_ Received Date: \_\_\_\_\_\_\_\_\_\_\_ 4HOnline Entry Date: \_\_\_\_\_\_\_\_\_\_\_ Entered By: \_\_\_\_\_\_\_\_\_\_\_**  |

**ARTS & CRAFTS – LEGO’S \_\_\_\_**

**ARTS & CRAFTS – MISCELLANEOUS \_\_\_\_**

**ARTS & CRAFTS – MODELS \_\_\_\_**

**ARTS & CRAFTS – NEEDLECRAFT \_\_\_\_**

**\*BEEF \_\_\_\_**

**BEEKEEPING \_\_\_\_**

**CAKE DECORATING\_\_\_\_**

**\*CAT \_\_\_\_**

**CAT POSTER (ANIMAL POSTER) \_\_\_\_**

**CHILD DEVELOPMENT \_\_\_\_**

**COLLECTIONS \_\_\_\_**

**COMPUTER SCIENCE \_\_\_\_**

**CONSUMER CLOTHING \_\_\_\_**

**COOKIE / CUPCAKE DECORATING \_\_\_\_**

**CREATIVE WRITING \_\_\_\_**

**CROPS – CORN \_\_\_\_**

**CROPS – HAY \_\_\_\_**

**CROPS – OATS \_\_\_\_**

**CROPS – SOYBEANS \_\_\_\_**

**CROPS – WHEAT \_\_\_\_**

**\*DAIRY \_\_\_\_**

**Purdue University Cooperative Extension is an equal access/equal opportunity institution.**

**DO YOUR OWN THING \_\_\_\_**

**\*DOG \_\_\_\_**

## **DOG POSTER** (ANIMAL EDUCATIONAL POSTER) **\_\_\_\_**

**ELECTRIC** \_\_\_\_

**ENTOMOLOGY \_\_\_\_**

**FLORICULTURE \_\_\_\_**

**FOODS** (BAKED AND/OR PRESERVED**) \_\_\_\_ FORESTRY \_\_\_\_**

**FUN WITH FOOD MIXES \_\_\_\_**

**GARDEN \_\_\_\_**

**GENEALOGY \_\_\_\_**

**GEOLOGY \_\_\_\_**

**GIFT WRAPPING \_\_\_\_**

**\*GOAT – DAIRY \_\_\_\_**

**\*GOAT – MEAT \_\_\_\_**

**\*GOAT – MYOTONIC \_\_\_\_**

**\*GOAT – PYGMY \_\_\_\_\_**

**HEALTH \_\_\_\_**

**HOME ENVIRONMENT \_\_\_\_**

**\*HORSE & PONY \_\_\_\_**

## **HORSE POSTER** (ANIMAL EDUCATIONAL POSTER) \_\_\_\_

**JUNIOR LEADERS** (Grades 7-12) \_**\_\_\_**

**\*LLAMA/ALPACA \_\_\_\_**

## **LLAMA POSTER (**ANIMAL EDUCATIONAL POSTER) **\_\_\_\_**

**MICROWAVE COOKING \_\_\_\_**

**MINIATURE DOLL HOUSE \_\_\_\_**

**PHOTOGRAPHY \_\_\_\_**

**\*POCKET PETS \_\_\_\_**

**\*POULTRY \_\_\_\_**

**\*RABBIT \_\_\_\_**

## **RABBIT POSTER** (ANIMAL EDUCATIONAL POSTER) **\_\_\_\_**

**SCARECROW** (Family Project) **\_\_\_\_**

**SEWING \_\_\_\_**

**\*SHEEP \_\_\_\_**

**SHOOTING SPORTS – ARCHERY \_\_\_\_**

**SHOOTING SPORTS – MUZZLELOADER \_\_\_\_**

**SHOOTING SPORTS – PISTOL \_\_\_\_**

**SHOOTING SPORTS – RIFLE \_\_\_\_**

**SHOOTING SPORTS – SHOTGUN \_\_\_\_**

**SMALL ENGINES \_\_\_\_**

**SOIL AND WATER \_\_\_\_**

**SPORTFISHING \_\_\_\_**

**SPORTS \_\_\_\_**

**\*SWINE \_\_\_\_**

**TOY FARM SCENE \_\_\_\_**

**TRACTORS – AG TRACTOR \_\_\_\_**

**TRACTORS - LAWN & GARDEN \_\_\_\_**

**TRACTORS - ZERO TURN \_\_\_\_\_**

**VETERINARY SCIENCE \_\_\_\_**

**WEATHER \_\_\_\_**

**WEEDS \_\_\_\_**

**WILDLIFE \_\_\_\_**

**WOODWORKING \_\_\_\_**

# Indiana 4-H Behavioral Criteria for all Youth Participants

Indiana 4-H has a set of behavioral criteria that we expect our participants to follow as outlined below. I have reviewed and agree to these expectations as a condition of my 4-H enrollment.

When attending, participating in, or acting on behalf of the 4-H program, all persons are expected to conduct themselves in accordance with accepted standards of social behavior, to respect rights of others, and to refrain from any conduct which may be injurious to the 4-H program to persons and the 4-H program.

As a participant in the Indiana 4-H Youth Development Program, I will:

* Respect, follow, and enforce the rules, policies, and guidelines established by the Purdue University Cooperative Extension Service, including all laws related to child abuse and substance abuse.
* Conduct myself in a courteous, respectful manner, exhibit good sportsmanship, and demonstrate reasonable conflict management skills. I will avoid any action that would obstruct or disrupt any 4-H activity, or that threatens or interferes with maintenance of appropriate order and discipline, and will also discourage others from any of those actions.
* Be truthful and forthright when representing the 4-H Youth Development Program. At no time, will I cheat or knowingly furnish false information.
* Present accurate, unaltered 4-H records.
* Follow the specific terms and conditions of a given project, contest, or activity. I will also encourage others to follow these terms and conditions.
* Under no circumstances possess, distribute, consume, or be under the influence of alcohol, tobacco or tobacco-like products, electronic smoking devices (including, but not limited to, e-cigs, vapes, Juuls), illegal drugs, or other dangerous substances at 4-H Youth Development Program events or activities.
* Under no circumstances distribute, misuse, or abuse over-the-counter, homeopathic (including supplements and vitamins), or prescription medications.
* Under no circumstances possess or use weapons, fire crackers, chemicals, or other materials that can be used to create an explosive mixture. Note: firearms and archery equipment utilized under the direct supervision of an approved and certified 4-H Shooting Sports Instructor at an approved 4-H Shooting Sports activity are acceptable.
* Recognize that verbal, physical, or emotional abuse, or any conduct which threatens or endangers the health or safety of any person will not be tolerated. Avoid any reckless or inappropriate behavior.
* Respect physical property of others. Theft of, or malicious damage to, property is not tolerated, nor is any unauthorized entry, use, or occupancy of any facility.
* Understand that failure to comply with equal opportunity and anti-discrimination laws, or committing criminal acts are not acceptable practices in 4-H Youth Development Programs.
* Embrace diversity among all youth and adult participants, helping each person to feel welcome and included in the 4-H Youth Development Program.
* Accept my responsibility to represent 4-H Youth Development Programs with dignity and pride by being a positive role model for others.
* Avoid inappropriate interactions with, and inappropriate displays of affection toward, other persons. I will not have unapproved guests in sleeping quarters at overnight 4-H events, nor will I engage in sexual behavior.
* Wear clothing that is appropriate for the event or activity.
* Avoid using any lewd, indecent, or obscene conduct or language.
* Accept supervision and support from Extension staff or designated volunteers.
* Be mindful of and follow Purdue, Centers for Disease Control and Prevention (CDC), and other state and local health authority safety guidelines and procedures related to any epidemic or pandemic illness.
* Participate in appropriate orientation and training, including youth protection standards, sponsored by the Purdue Cooperative Extension Service.
* Operate machinery, vehicles, and other equipment in a safe and responsible manner.
* Not misuse fire equipment or sound a false fire alarm.
* Treat animals in a humane manner and teach program participants appropriate animal care and management.
* Use technology in an appropriate manner that reflects the best practices in youth development. During virtual 4-H activities, I will follow acceptable University practices being mindful of the virtual learning environment.
* Accept my responsibility to promote and support the 4-H Youth Development Program in order to develop an effective county, state, and national program.

**□By checking this box and signing this form, we have read and completed all required authorization sections above and agree to the terms**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Print 4-H Member Name Date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 4-H Member Signature (required if 18 years of age or over) Date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Parent/Legal Guardian Signature Date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Parent/Legal Guardian Signature Date

Purdue Extension is an Affirmative Action/Equal Opportunity Institution.

Reviewed and Approved 12/2025