# Durham County 4-H

# Summer Fun 2040

Location: All camps are held at the Durham County Cooperative Extension Center 721 Foster St Durham Lunch: All campers must bring a lunch and snack daily

For more information contact us at 919-560-0525





# **Registration Information**

# **Durham County 4-H Office Hours:**

Monday through Friday 8:30 a.m. – 5:00 p.m. Registration by phone: 919-560-0536

# No On-line Registration

For a variety of reasons, we do not offer on-line registration. We do invite you to use the section of the CES web site to download the brochure of camps offered this summer. You may register by mail or in person.

# **Mail Registration**

Camp mail-in registration begins as soon as you receive this brochure. Mail your registration along with your check or money order payable to Durham County 4-H to NC Cooperative Extension, 721 Foster Street Durham, NC 27701.

# Walk-in and Phone Registration

You may register in person or by phone between 8:30 a.m. and 5:00 p.m. Monday through Friday in the 4-H office (room 107) of the Durham County Cooperative Extension Service. Phone—in registration is not complete until all forms and payment have been received.

# **Register Early**

Many camps fill up quickly so we urge you to register early. Enrollment is guaranteed only by payment of your camp fee and space availability. If minimum enrollment is not met, for any particular camp, it will be cancelled. Please register ahead of time so we can plan accordingly.

#### **Confirmation**

You will receive confirmation of camps you have registered for once all forms and payment have been received.

### **Questions**

Call 919-560-8295 for further information or email cmoses@dconc.gov

#### **Payment Options**

Durham County 4-H accepts checks or money orders only. Full payment for day camps is due May 31st, 2018. Spots unpaid for will be opened back up for enrollment after this date. Deposit of \$100 is due for residential camp on May 31st.

# Cancellations, Withdrawals and Refund Policy

Enrollment is limited in our camps so once you have enrolled, your participation is important to us...we are counting on you to attend. If you must withdraw from a camp, we provide these options:

#### If Durham County 4-H cancels a camp...

You will receive a full refund. Please allow 3-4 weeks for processing.

#### If you need to withdraw from a camp...

You must notify Durham County 4-H at least two weeks before the camp begins. You will receive a refund less \$10. Please allow 3-4 weeks for processing.

#### If you have an emergency...

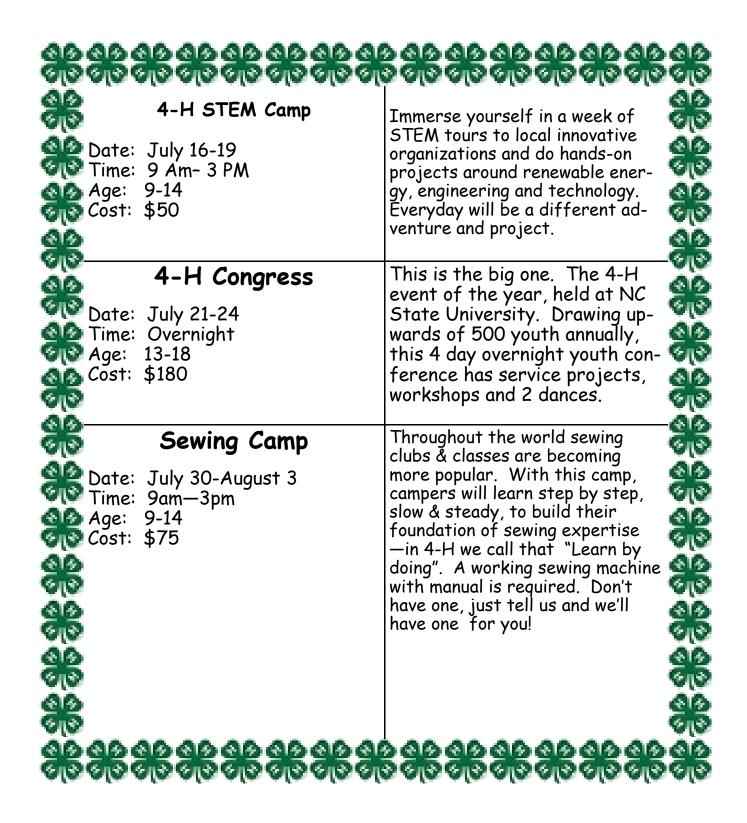
If an emergency prevents you from attending or continuing camp, Durham County 4-H may extend credit toward a future camp. Any credit you receive will be valid for one year from the date of the camp.

#### If your schedule changes within two weeks of the beginning of camp...

You will not receive a cash refund. You may enroll in another camp, transfer your enrollment to a family member or friend or Durham County will extend a credit toward a future camp. This credit will be valid for one year from date of the camp.

# Again, mark your calendars...there will be no reminder calls!!







Participant Information:

#### 2018 Durham County 4-H Summer Fun Registration Form (One Registration Form per Child)



\$200

\$180

\$50

Total

# All Fees Must Be Paid In Full upon returning this Registration Form

First Name: (Youth's name)	Last Nam	ne:	
(Youth's name) Complete Mailing Address:			
DOB: Age:Age:	_Gender:S	chool:	
Have you participated in 4-H Summer	r Fun Program befo	ore? YesNo	
Phone Number (Required) Home:		Mobile:	
Parent/Guardian Information:			
Parent/Guardian Name(s):			
Complete Mailing Address:			
Phone Number (Required) Home:			
Email address:			
Emergency Contact (Name)			
Emergency Contact Phone			
		owing Summer Program	
Complete Worksho	p Title		Fee
Clover Bud Camp	(Gardening)		\$25
Betsy Jeff Penn	4-H Residentia	l Camp	\$420- \$480
AG Leadership			\$50
Sewing Camp			\$75

# \*Make all checks payable to Durham County 4-H.

Citizenship Focus

4-H STEM Camp

4-H Congress

\*\*A completed 4-H Enrollment Packet is required by all camp participants. Call (919) 560-8295 or visit 4hdurham.org for more information.









Name of	f 4-H Gro	up/Unit					Year:
Membe	r Name:	First		Middle		I-d	
Address	c:	Pirst	,	инаане		Last	
rium co.		Street Address		City	State	Zip Code	
Phone:	<u></u> _	F	Email:			County: _	
Gender	*: Mal	e Female	Date of B	irth:	Grade:	School Attendin	g:
Do you Live*: Farm City over 50,000 people Suburbs of city over 50,000 people Suburbs of city over 50,000 people Military Installation:  Do you have parent/guardian(s) active in the military? Yes No							
				Navy Marines		National Guard (A	ir & Army) Reserves
Ethnic g	Ethnic group*: A. Choose One Hispanic or Latino Non-Hispanic or Latino B. Choose all that apply: White or Caucasian Asian						
		B	lack or African			ve Hawaiian or othe	
Parent (	or Guard	ian: First	,	Middle		Last	
Address	5:						
	Street Ac	ldress		lity	State	Zip Code	
Phone:		le Daytime/Cell p	hone	() Area Code	Home phone	Email (if applicable)	
Additio	nal Pare	nt or Guardian:					
	_		First		Middle		Last
Address	Street Ac	ldress		City	State	Zip Code	
Phone:	()_	***************************************		()		zap cour	
	Area Cod	e Daytime/Cell p	hone	Area Code	Home phone	Email (if applicable)	
1. A parent or guardian should sign below whichever statement you wish to apply to the youth's involvement in 4-H programs.							
I agree to allow 4-H to take photographs/audio/video 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.							
<ol> <li>The enrolling youth is bound by the NC 4-H Code of Conduct and Disciplinary Procedure for 4-H events and activities. The youth should initial here if he/she has received and reviewed the NC 4-H Code of Conduct and Disciplinary Procedure for 4-H events and activities.</li> </ol>							
* This information is required for all federally assisted programs and is solely used for the purpose of determining compliance with Federal civil rights laws; your responses will not affect consideration of your application. By providing this information, you will assist us in assuring that this program is administered in a nondiscriminatory manner.							
					SLIEGE OI		office use only
					RE & LIFE SCIE		4-H Membership # Date entered:

NC STATE UNIVERSITY

Revised 11/13/09

Distributed in furtherance of the acts of Congress of May 8 and June 30, 1914. North Carolina State University and North Carolina A&T State University commit themselves to positive action to secure equal opportunity regardless of race, color, creed, national origin, religion, sex, age, or disability. In addition, the two Universities welcome all persons without regard to sexual orientation. North Carolina State University North Carolina A&T State University, U.S. Department of Agriculture, and local governments cooperating.



# 4-H MEDICAL INFORMATION AND INFORMED CONSENT FOR TREATMENT FOR NC 4-H SPONSORED EVENTS

4-H'ers Name

PLEASE READ AND COMPLETE THE FOLLOWING FORM. THIS FORM MUST BE PRESENTED AT THE OFFICIAL REGISTRATION FOR THE 4-H SPONSORED EVENT BEING ATTENDED.

	I. Medical Informat	tion
Known allergies to foods, drugs, insect stings or bit	tes, etc:	
Special medical concerns or conditions that event st diabetes, previous injuries to bones/joints, etc.:	•	including contagious illnesses, epilepsy, asthma,
List special dietary needs:		
Medications currently being taken (name of medica frequency):	ation, dose, and	
Family Physician: Name	Phone # (	
Address		
The 4-H program purchases insurance for youth par pay for some medical expenses and it may be neces	rticipants for many sponsored	events. In some cases, this coverage will not
Health Insurance Company		Health Insurance
Policy #		Company Address
Number ()		Phone Company Telephone
If you are a person with a disability and desire any please contact [name, office] at accommodations at least [hours/days]	[phone number/TTY] d	ther accommodations to participate in this activity, uring business hours of 8 a.m. and 5 p.m. to discuss
Signatu	res Acknowledging Parts I, l	I, and III
Parent's/Guardian's signature	Date:	
Participant's Signature:	D	ate:
Parent/Guardian telephone #: Home	Work	
Months annotated and some had II'm and Broom Complete	lof2	and the A. When B. Donnell Countries is a second district for an about the

#### IV. Informed Consent

In the event that a participant needs minor medical care from 4-H or more significant medical care from a qualified health care provider, including in rare cases possible hospitalization and/or surgery, the parent/guardian is asked to sign the informed consent form below. In case of serious medical condition, 4-H will make every effort to notify the parents, but the first priority may be providing care to the participant.

Authorization to Consent to Health Care for I	Minor	
I,	orize any adult(s) ac	County, am the custodial a minor child, age, born ting as agents (including official volunteers) or d in whose care the minor child has been
entrusted, to do any acts which may be necessincluding, but not limited to, the power (i) to the employing of any physician, dentist, nurs authorize any health care, including administ	ssary or proper to p provide for such h e, or other person f ration of anesthesia	rovide for the health care of the minor child, ealth care at any hospital or other institution, or or such health care, and (ii) to consent to and
This consent shall be effective for one year fr	rom the date of the	execution.
Custodial Parent Signature		Date
STATE OF NORTH CAROLINA COUNTY OF		ly appeared before me the said named
On this day of, to me keexcuted the foregoing instrument and he (or duly sworn by me, made oath that the statement	she) acknowledge	that he (or she) executed the same and being
My commission expires		, 20
	Nota	y Public
(OFFICIAL SEAL)		





#### 4-H Code of Conduct and Disciplinary Procedure North Carolina Cooperative Extension Service Department of 4-H Youth Development

#### Purpose and Application:

- A. The 4-H Code of Conduct is intended to foster a safe environment that is conducive to optimal learning and growth. Toward that end, youth participants are expected to behave in a way that respects the rights and property of others, and that will not disrupt or interfere with 4-H program goals.
- This 4-H Code of Conduct and Disciplinary Procedure is a condition of participation in any North Carolina 4-H activities or programs.

#### II. Behaviors Prohibited at 4-H program Activities:

- Possession, selling, and/or use of alcoholic beverages, tobacco products, and illegal drugs OR being present where individuals are using alcohol, tobacco products and/or any illegal substances
- B. Any kind of sexually related physical contact
- Possession of weapons or firearms (except while participating in a 4-H Shooting Sports Event)
- D. Behavior that violates state or local laws
- E. Damage to property of others
- Theft, misuse or abuse of public or personal property
- G. Conduct that jeopardizes the safety of self or others
- H. Conduct that disrupts or interferes with 4-H programming
- Leaving a program or facility without permission of parents or 4-H staff (including authorized volunteers)
- J. Inappropriate dress, including but not limited to clothing that is sexually suggestive, indecent, or otherwise disruptive to the operations or goals of 4-H. Examples include clothing with negative or hateful language or symbols; see-through blouses, skirts or pants; sagging pants; exposed undergarments; bare midriff shirts; and excessively short or tight garments. Clothing should meet the standards expected in public schools. Specific clothing requirements may be required where appropriate for a particular event
- K. Unruly behavior in hotels and public areas, particularly during overnight events. There should be no running in the halls, prank calls, unnecessary noise, excessively late hours, or visiting in rooms of the opposite sex

#### III. Additional Basis for Disciplinary Action

County or State Extension personnel may impose discipline pursuant to Part IV below in cases of misconduct by current, former, or prospective 4-H participants if, in the judgment of 4-H personnel or their supervisors, the misconduct poses a potential risk to the 4-H program. This includes risks to the safety or well-being of others and risks to the effective functioning or integrity of 4-H. This applies regardless of whether the misconduct occurred during a 4-H activity or in a setting unrelated to 4-H activity.



#### IV. Disciplinary Procedures:



- A. Discipline may be imposed by any 4-H staff or Cooperative Extension Service employee who has oversight responsibility for 4-H activities.
- B. Unless immediate action is required, the following procedures must take place before there can be any finding or conclusion of guilt:
  - 1) the accused participant shall be told the charge (which of the prohibited behaviors listed above he or she is accused of violating), and
  - the accused participant is told what factual evidence supports the charge, and
  - the accused participant has been given a chance to tell his/her side of the story.
- C. The 4-H staff person must be satisfied that the participant more likely than not engaged in the prohibited behavior before imposing a sanction.
- D. Sanctions may include some or all of the following:
  - 1) Verbal warning
  - 2) Notification to parents
  - 3) Immediate removal from the activity
  - 4) Being placed on a behavior contract
  - 5) Referral to local law enforcement and/or juvenile court
  - 6) Program suspension and/or
  - 7) Expulsion from program
  - 8) Other sanctions appropriate to the circumstances, as determined by 4-H.

#### E. Appeals

- 1) Disciplinary action for local or county-level events may be appealed to the County Director and or 4-H Agent. All appeals must in writing and must be received by the County Director and or 4-H Agent within 30 days of the disciplinary action. The County Director and or 4-H Agent or designee shall review the appeal statement, any written response from the decision maker, and may review other relevant information. The County Director and or 4-H Agent shall send a written decision to the appellant, the 4-H staff member who made the initial decision, and Head of the Department of 4-H Youth Development. The County Director and or 4-H Agent's appeal decision shall constitute the final agency action unless the Department Head chooses to exercise further review.
- 2) Disciplinary action for regional or state-level events may be appealed to the Head of the Department of 4-H Youth Development, Cooperative Extension Service, Box 7606, NC State University, Raleigh NC 27695-7606; telephone (919) 515-3242. All appeals must in writing and must be received by the Department within 30 days of the disciplinary action. The Department Head or designee shall review the appeal statement, any written response from the decision maker, and may review other relevant information. The Department Head shall send a written decision to the appellant and the 4-H staff member who made the initial decision, and the Department Head's appeal decision shall constitute the final agency action.

#### F. Immediate action situations:

4-H or Extension staff may take immediate action to remove a participant from an activity and other action as needed, where there is an emergency situation or significant risk of continuing misconduct. In those cases, the immediate action is temporary discipline and the 4-H or Extension staff must arrange for the procedures in parts B, C, D, and E above as soon as possible but in no event longer than seven days from the temporary discipline.