# 4-H ONTARIO PARTICIPANT AGREEMENT FORM # 6.8

In 4-H, participants include both Members and Volunteers. We therefore ask that both Members and Volunteers complete the Participant Agreement Form in order to participate in the 4-H program. If the participant is under 18 years of age, the parent/guardian should complete this form prior to the participant's involvement in their first 4-H activity. It is the responsibility of the parent/guardian to notify/update the 4-H Volunteer of any changes to the information on this form.



Within the Participant Agreement Form, some information that is requested may be sensitive in nature. 4-H staff and Volunteers collect a variety of information in order to ensure the connection, safety and care of all participants. The purpose of the information collected here is to provide 4-H Ontario with the information needed to facilitate 4-H activities, and to be able to respond in the event of an emergency. This information is also used to keep Members and Volunteers up to date on activities within 4-H Ontario including programs, services, and initiatives. Information will be gathered, stored and destroyed in accordance with the Canada Health Act and privacy laws.

NEW RETURNING MEMBER	VOLUNTEER STAFF		
4-H Ontario ID # (if applicable):	Local Association:		
Participant Full Name (First Middle Last):	Preferred Name (i.e. Chris instead of Christopher):		
Birth Date (MM/DD/YYYY):	Gender: Male Female		
Address:	City/Town:		
Province:	Postal Code:		
Home Phone:	Work Phone:		
Cell Phone:	Email Address:		
Primary Contact (Parent/Guardian/Spouse)  Full Name (First Middle Last):	4-H Ontario ID # (if applicable):		
Home Phone:	Relationship to Participant:		
Alternate Phone:			
	Email:		
Mailing Address (if different from above):	Email:		
	Email:		
	Email:  4-H Ontario ID # (if applicable):		
Secondary Contact			
Secondary Contact Full Name (First Middle Last):	4-H Ontario ID # (if applicable):		

## **SECTION 3: HEALTH AND SAFETY INFORMATION**

This information is <u>voluntary</u> and participants are not required to complete this portion of the Participant Agreement Form, however, this information is gathered for communication with health care providers in the event of an emergency. Please include any information that 4-H activity organizers may require to ensure the participant's safety, and a positive 4-H experience.

3 A) Emergency Contact (If	oarent/gua	rdian not available)				
Name:			Relationship	p to Participant:		
Phone:			Alternate Pl	hone:		
3 B) Health Care Provider of	Member					
Physician/Medical Practice Nam	e:		Phone:			
3 C) Medical / Behavioural / Are there any medical condition activity organizers should be a	ns, disabili	ties, family circumstan				
Medical / Behavioural						
Description/Details:						
Allergies						
□ Drugs		Environmental:	□ Foo	od		Other
Description/Details:						
Dietary Requirements						
□ Vegetarian/Vegan		Celiac/Gluten Free	□ La	ctose Free		Other
Description/Details:						
SECTION 4: MEDIA RELL	EASE					
While participating in 4-H active memories and promote 4-H. If Ontario 4-H Council, 4-H Ontario 4-H Council, 4-H Ontario 4-H council, 4-H ontario 4-H council, 4-H ontario audio recordings taken of mysillustration, advertising or publical recorded media, prints and hereby consents to authorize appear in electronic form on the	Please indication Associated or my chication and created methology.	ate below your consertions and Ontario 4-H hild for use on 4-H web without compensationed in from the content sion of the name of the	nt to the use an Foundation) of esites, in print a . All such pho hall constitute participant. <i>Im</i>	nd reproduction to f any and all pho- and other media tographs, video ro the property of 4 aportant Remino	by 4-H On tographs, for the pul recordings I-H. In add <b>der:</b> Photo	tario (representing the video recordings and recordings and recordings and audio recordings and ition, the undersigned
I consent. I DO NO	T consent.					
Signature of Adult Participant				Date of Signa	ature	
For participants under age 1 consent on his/her behalf.	8: The und	ersigned hereby certifi	es that as the	parent or guardia	an of 4-H <sub>l</sub>	participant I give my
Signature of Parent/Guardian				Date of Signa	ature	

#### SECTION 5: 4-H ONTARIO CODE OF CONDUCT AGREEMENT

4-H Ontario is dedicated to the personal development of youth while providing a positive impact on Members, Volunteers and communities in Ontario. In order to achieve this mission, the 4-H Ontario Code of Conduct applies to all participants of the 4-H program in Ontario (all Staff, Volunteers and Members). It addresses the general rules of conduct necessary to maintain the standards of the 4-H program. To truly be an organization of leaders building leaders, each individual is expected to follow the code of conduct. Failure to do so may result in dismissal from the 4-H Ontario Club/activity/program. In case of dismissal, no portion of fees whatsoever will be refundable. Interpretation of this code is at the discretion of 4-H Ontario and/or those 4-H Volunteers and/or staff responsible for the activity, in consultation with others as appropriate.

- 1. 4-H participants will respect, adhere to and enforce rules, policies and guidelines established by the national, provincial, regional and local 4-H governing Associations and Councils.
- 2. 4-H Members, Volunteers, guests and stakeholders shall be treated using appropriate and courteous manners as the participant himself or herself would like to be treated while ensuring respect for people and property.
- 3. A positive 4-H image is expected at all times. 4-H participants will conduct themselves in a courteous and respectful manner, exhibit good sportsmanship, and act as a positive role model for those around them. Behaviour must be conducive to a friendly, safe and fun learning environment.
- 4. Emotional, physical, verbal, mental or sexual abuse of any individual participating/attending a 4-H event/activity will not be tolerated, nor is the use of profanity, crude remarks or actions.
- 5. Maintaining the privacy of 4-H participants is important. Respect will be given to the confidential nature of information received regarding fellow 4-H participants and 4-H program affairs.
- 6. Any acts of discrimination and/or harassment on the basis of race, nationality or ethnic origin, colour, age, religion, family status, sexuality or disability is unacceptable.
- 7. Possession and/or use of alcohol, illegal drugs or illegal inhalants is forbidden by participants (regardless of age of majority) at activities held for attendance by 4-H Members. Any disregard for this policy will result in disciplinary action.
- 8. 4-H participants will regard it as their personal duty to know their 4-H responsibilities thoroughly and are expected to be responsible to their peers.
- 9. 4-H participants will ensure that outside interests do not jeopardize their judgment and competence as contributing 4-H participants. 4-H participants will strive to the best of their abilities to promote the motto "Learn To Do By Doing" and the philosophies of the 4-H program while participating in a 4-H activity.
- 10. Local 4-H Associations and or programs may have additional guidelines and/or policies that need to be adhered to. It is the responsibility of the 4-H participant to ensure that he/she is aware of and understands these additional rules and responsibilities.

For participants of all ages (Youth (Member and Non-Member and I agree to abide by this Code. I understand that any breach dismissing me from the activity and/or from the 4-H Ontario programmer.)	of the 4-H Ontario Code of Conduct could be cause for
Signature of Participant	Date of Signature
For parents/guardians of participants under 18: I have review abide by this Code. We both understand that any breach of the 4 child from the activity and/or from the 4-H Ontario program.	
Signature of Parent/Guardian	 Date of Signature

#### **SECTION 6: CONSENT TO PARTICIPATE**

participate in the full range of activities. I authorize reasonable period of time during a medical emergency personnel to the 4-H Volunteer, in the procedures (including admission to the hospital) and well-being of the child. Such action is to be I have read and understood the above policies a child as previously outlined above.  I understand that participating in 4-H Ontario is a After considering the risks involved, and having the second process.	ild to participate in 4-H activities, I, the undersigned permit my child to ze that if I, the undersigned is incapable or cannot be reached within a regency, as determined by 4-H, 4-H is granted permission to designate the e event of an accident or illness affecting the child to authorize on my behalf all and necessary treatment herein as he/she may deem essential for the care only when immediate contact with the parent/guardian cannot be made.  Indicate the care to notify 4-H of any special needs/considerations for my roluntary and involves a certain degree of risk concerning some 4-H activities. Full confidence that reasonable precautions will be taken to ensure the safety my child to become a Member of 4-H Ontario and participate fully in its
Signature of Parent/Guardian	Date of Signature
<ol> <li>Consents to the collection of the persor (collectively the "personal information")</li> <li>Represents to 4-H Ontario, the Ontario information is true, complete, accurate</li> <li>Releases and indemnifies 4-H from any incorrectness of the personal informatio</li> <li>Represents that the participant is in good personal information; and</li> <li>Agrees to notify 4-H if the participant is the commencement of the activity in whom</li> </ol>	4-H Council and Ontario 4-H Foundation (together "4-H") that the personal and correct; or claims arising as a result of any untruth, incompleteness, inaccuracy or on; od health and is able to participate in all activities of 4-H except as noted in the exposed to an infectious disease at any time during the three weeks prior to nich the participant will participate;
Signature of Participant/Parent/Guardian	Date of Signature

# Please submit a paper copy with your signature.

Youth Participants (Members and Non-Members): Please submit it to the event organizer leading the activity (4-H Club leader, or Regional event organizer, etc.).

**Volunteers:** Volunteer gives the form to the organizer of the activity in which that Volunteer is engaged:

- A) If you are volunteering with a Club, the form should be kept in the club binder with all forms of that club
- B) If you are volunteering with Board activities, the form should be kept by the Board Secretary
- C) If you are volunteering with a Regional or Provincial opportunity, the form should be kept by the event organizers
  - D) If you are volunteering or attending a National 4-H event, submit to the National event organizer

Thank-you for taking the time to complete this Participant Agreement Form.

### **PRIVACY STATEMENT**

Ontario 4-H Council ("4-H Ontario") Privacy Statement - 4-H Ontario respects the privacy of its members, volunteers, donors, sponsors, staff and stakeholders. We are committed to ensuring that appropriate measures and safeguards are in place to protect specific information that is held for the purpose of 4-H Ontario programs. We adhere to legislative requirements with respect to privacy. We do not rent, sell or trade mailing lists. If at any time you wish to be removed from any of our contact lists, simply contact us by phone at 519-856-0992, toll free at 1-877-410-6748, by fax at 519-856-0515 or via our website at www.4-H Ontario.ca. We will gladly accommodate your request. For further information regarding our commitment to privacy, please contact 4-H Ontario's Privacy Officer at <a href="mailto:privacy@4-hontario.ca">privacy@4-hontario.ca</a>.