

September 4, 2014

2014 NJ State 4-H Competitive Trail Ride

Dear Competitors, Coaches, Leaders and Volunteers,

The 2014 State 4-H Competitive Trail Ride is set for **Sunday, October 12th, 2014** in Cumberland County. The ride will take place at the Cumberland County Fairgrounds in Millville, NJ (*directions enclosed*) The Trail Ride Committee has been busy organizing this event and making plans to ensure that the event runs smoothly.

Enclosed is the entire trail ride packet. The information will be available on the 4-H website this week (www.nj4h.rutgers.edu/horses). Please review the enclosed information and forward it to your trail ride coach and interested 4-H members. Again this year we will hold a 1/2 mile competitive trail ride for first time competitors.

Registration:

Registrations are due **Friday, September 26th, 2014**. Registrations may be faxed to Cumberland County office at (856)-451-4206. A check for team registration fees (\$45/rider) must be made payable to "**Cumberland County 4-H**." 4-H agents/program associates must sign the team registration form before returning it to the Cumberland County 4-H Office on September 26th.

Stalls & Trailers:

Stalls will be available on the fairgrounds for \$10/weekend.

Dinner:

The Trail Ride Awards Dinner will be held Sunday evening after the completion of the ride on the fairgrounds. See enclosed County Reservation Form.

Sponsors:

Counties are responsible to secure one (1) \$50.00 sponsorship, to be mailed in with your Team Registration Form. See enclosed form.

Volunteers:

Each county needs to provide a minimum of two volunteers per team to help that day.

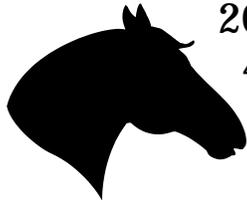
Remember:

Please remind coaches and team members that they must bring their horse's health papers to the ride to be checked at registration. Record books WITH Trail Ride Supplement should be checked by the County Office prior to the ride.

The Cumberland County 4-H Horse Volunteers look forward to hosting this year's event and hope to make it one of the best ever.



Carol K. Ward
Somerset County 4-H Agent



2014 New Jersey State 4-H Competitive Trail Ride

Information Sheet

- Date:** October 12th, 2014
- Location:** Cumberland County Fairgrounds
3001 Carmel Rd, Millville, NJ
- Time:** Check-in will be from 4:00 PM-7:00 PM on Saturday, October 11th and
7:30 AM, Sunday, October 12th
- Open To:** Jr. Riders Grades 5-8 (as of Sept 2013)
Sr. Riders Grades 9-13 (as of Sept 2013)
- Entries Due:** Friday, September 26, 2014
Fax to (856)-451-4206
- Entry Fee:** \$45.00 per rider includes dinner
- Remit to:** Make checks payable to Cumberland County 4-H Advisory
- Returned checks will be charged a \$40.00 fee.**
- Mail Entries To:** Cumberland County 4-H Office
C/O Cyndy Hetzell
291 Morton Ave
Millville, NJ 08332
- Sponsorships:** One \$50.00 sponsorship per county
- Awards:** See "Rules." Awards dinner will take place following the "ride".
Additional Tickets are available for \$15 per ticket.
- Questions:** Cyndy Hetzell nflash@aol.com 609-420-7290 c 856-358-6124 h
Stella Almeida Equine.lady@verizon.net 732-542-5152
Carol Ward Ward@NJAES.Rutgers.edu 908-526-6644

NEW JERSEY STATE 4-H COMPETITIVE TRAIL RIDE

PROJECT INFORMATION

This program is designed to stimulate greater interest in trail riding, to teach proper methods of training and conditioning horses for trail riding, to encourage good horsemanship and safety on trail rides. Trail riding is a healthy, enjoyable recreation. It is fun and gives one the opportunity to enjoy and appreciate the beauty of the Garden State. Riders have the responsibility to respect the property rights of others and to share the trails with other trail users.

It is hoped that this program will stimulate interest in preserving existing horseback riding trails and encourage the development of many miles of new multi-use trails for present and future New Jersey horse people.

A twenty-five (25) mile trail ride, with natural obstacles, will be judged on condition and management of the horse.

OBJECTIVES FOR THE COMPETITIVE 4-H TRAIL RIDE PROJECT

1. To buy, lease, or raise a horse, pony, mule or donkey for competitive trail riding. (The animal must be at least (48) months old to participate.)
2. To learn about, make and follow plans for your horse to have:
 - a. Proper shoeing and hoof care
 - b. Proper dental care
 - c. Proper veterinary care and vaccinations
 - d. Treatment to control internal parasites
 - e. Proper housing and bedding
3. To learn how to condition and train a horse for a competitive trail ride.
4. To learn the normal parameters of a horse's temperature, pulse and respiration and how to measure your horse's TPR.
5. To learn how to prepare for a competitive trail ride.
6. To develop self-discipline.
7. To compete in a competitive trail ride.

Trail Riders are evaluated several ways during the event, with the various areas being combined for a total score.

Prior to the event, 4-H'ers should be taught how to inspect their horse for injuries, unsoundnesses and blemishes. The Coach should explain how to take the information the 4-H'er has identified and gathered, and apply it to the ***Trail Ride Declaration Form***. The 4-H'er should inspect the horse prior to and after each ride, comparing the

findings. The 4-H'er will learn what changes take place in the animal, what the changes are a result of, and if applicable, how they can be prevented. The Declaration Form is used as a tool in the Veterinary Score.

Riders should become familiar with the Veterinary Score Sheet, and how a score is determined. The Veterinary Score directly reflects the health and condition of the horse, which in turn reflects the amount of care and exercise the horse has received in preparation for this project.

The Horsemanship/Management Score is an evaluation of how well the 4-H'er handles the horse on the trail, and cares for the horse prior to the ride, at mid-point, and at the conclusion of the ride. Evaluation includes the grooming of the horse, how well equipment fits, condition of the equipment, sportsmanship, and presentation to the judges. At an event, it is the responsibility of the rider to totally care for the horse or pony. Competitors should learn to be self-sufficient. Outside assistance could eliminate a rider from a management award. Riders are allowed to have one horse-holder only during midpoint and at the end of the ride, but this person should not be instructing the 4-H'er what to do. Another 4-H'er can help a competitor and adults from a different county will be available to provide assistance. This is a good opportunity for older club members to develop their leadership skills, by instructing the younger 4-H'er in correct grooming, tack care and horse management necessary for trail riding.

Suggested State Trail Ride Management Set-Up

The State Trail Ride set-up should include any item that is necessary for a horse's needs. The lay-out should not include any type of medicines or ointments for the horse (no first aid kits). A Veterinarian will diagnose what is wrong with the horse and provide treatment if necessary. An average set-up should consist of:

- saddle rack

- hard hat

- grooming tools

- cooler sheet

- blanket

- water jugs for horse

- water buckets (a minimum of two filled buckets are needed at mid-point and 2 at camp site. Buckets should be labeled with your name and county on the bottom of the bucket only)

- sweat scraper

- extra halter and lead line

- hoof picks

- saddle, bridle, breast plate and any other equipment

- sheet

- wash bucket, sponges

- towels

- hay hung on side of trailer. (all hay bags should be hung with a safety snap or tied with a safety knot)

- bed sheet, old blanket or tarp to put everything on

A tarp or other water-proof cover to place over set-up while competing on ride.

Horsemanship/Management category will be judged on:

- ◆ Safety Practices
- ◆ Neatness and Appearance (good safe workmanlike clothing and equipment - appropriate for competitive trail riding.)
- ◆ Grooming
- ◆ Tack and Equipment and its Condition and Fit
- ◆ Management and Care of Horse/Pony
- ◆ Trail for Manners, Proper Gait for Terrain and Pace
- ◆ Sportsmanship
- ◆ All Presentations to the Judges (Horse Trained to Stand & Trot Out)
- ◆ Condition and Fitness of the Horse or Pony
- ◆ Suitability of Horse to Rider
- ◆ Organization and Neatness of Work Area

This award category is a good test of 4-H'ers knowledge as a horse person and their abilities as a trail rider.

Directions to the Cumberland County Fairgrounds

From West Jersey /Trenton area

295 South 34 miles south of Trenton.

Take right at fork for 42 S/Atlantic City go 2 miles.

Take exit 13 for 55 S Glassboro/Vineland go 30 miles.

Take exit 29 for County Road 552 towards Bridgeton/Vineland go .2 miles.

Turn Left onto County Road 553 W Sherman Ave 3.1 miles.

Turn Left onto County Road 608 New Beaver Dam Road go .2 miles

Turn Right onto Morias Ave go .4 miles to Cumberland County Fairgrounds

From Toms River area

Take Garden State Parkway/ US Route 9 South for 55 miles to Exit 25 Ocean City Merge onto Route 9 n/Vernon rd for .1 mile

Take Right onto 9 S/ Roosevelt Blvd for .7 miles

Continue on Tuckahoe Rd for 4.9 miles

Take slight Right onto 50 N for 1.9 Miles

Turn Left onto NJ 49 W for 21 miles

Turn Right onto Morias Ave for 1.3 miles to fairgrounds

2014 NJ 4H STATE TRAILRIDE DINNER
Sponsored by Cumberland County 4-H Horse Leaders

Youth registered for the ride will have dinner with their registration fees. Please order extra dinners for coaches, parents and others.

Buffet Style Dinner ~cost per person is \$15.00 which includes but not limited to the following:

BBQ & Pork

Green Salad

Rolls

Potato Salad and Cold Pasta Salad

Desserts

Variety of Soda

Make checks payable to "Cumberland County 4-H Advisory" - Please send **NO LATER THAN** September 26th!

Mail forms to:
Cumberland County 4-H Horse Clubs
291 Morton Ave
Millville, NJ 08332

Any questions, please call 856-451-2800

County _____

Contact person _____ Phone _____

of dinners ordered _____ X \$15 = Total enclosed \$ _____

Entry and Sponsorship Fee sheet

County Contact Person/Trail Ride Coach _____

Address _____

Phone(s) & best time to call _____

e-mail _____

of riders for this county X \$45 = Total entry fees = _____

\$50 Sponsor (One per County Required)

Name of Sponsor _____

Address _____

Mail to: Cumberland County 4-H Horse Clubs
C/O Cyndy Hetzell
291 Morton Ave
Millville, NJ 08332

There will be a \$40 fee for returned checks.

TOTAL AMOUNT ENCLOSED \$ _____

State Trail Ride Schedule

PRE-RIDE

Riders Arrive and park in designated areas by County
Unload and tie horses to trailer (If it is unsafe to tie the horse to the trailer, ask another 4-H member or adult from another county to hold the animal for you while you prepare for the ride.)
Arrange Setup
Parents are not allowed in management area once horses are unloaded
Riders attend pre-ride briefing
Horses are vet checked and P&R are recorded
Riders are permitted to tack up if setup is checked, once tack had been checked riders can warm up mount
When all horses are vet checked, riders mount one at a time at mounting block in presence of horsemanship judge and ride out
Vet must watch riders ride out at a trot
Time out is recorded

MID-POINT

Parents are not allowed to help their children at midpoint, if child needs assistance they need to ask a steward.
Parents will be assigned designated area at mid-point.
Riders enter midpoint and time in is recorded; P&R/Time card handed to rider
Riders are handed snack and drink
Riders have ten minutes to cool horse
P&Rs are taken at ten minutes
At 20 minutes from time in, rider may ride out unless held by vet

Finish

Parents are not allowed to provide assistance and must stay clear of trailer area.
Riders time in is recorded
Riders have 20 minutes to cool horse out
Riders present horse for P&R at 20 minutes
Riders present horse to vet for trot out
Riders present horse to vet for hands on inspection
(*trot out- hands on order may be reversed but must be done the same for all horses*)
Riders return to trailer area
Horsemanship/Management judges must watch riders at least once on trail

Vet must observe horse on trail at least once

**STATE 4-H TRAIL RIDE
MANAGEMENT SCORE SHEET**

Competitor #

(50 pts.)

Horse Cleaned & Groomed Properly (Maximum Score = 10 points)

	Comments
Dirt , Foreign Objects & Sweat Marks (4)	
Feet (3)	
Udders or Sheaths & Vent (1)	
External Parasites (1)	
Clipping (1)	

Cleanliness of Gear & Tack (Maximum Score = 10 points)

	Comments
Cleanliness of Leather/Nylon (5)	
Other Equipment Clean (3)	
Metal Polished (2)	

Organization & Neatness of Area for Working (Maximum Score = 10 points)

	Comments
Container Security (3)	
Organization of Layout (4)	
Emergency Numbers (3)	

Safe Equipment & Practices (Maximum Score = 10 points)

	Comments
Tying (height, length, knot) (5)	
Soundness of Equipment (5)	

Feed & Water Available (Maximum Score = 10 points)

	Comments
Feed (3)	
Water (4)	
Feed Equipment/Buckets Clean (3)	

TOTAL POINTS

Competitor #

STATE 4-H TRAIL RIDE
HORSEMANSHIP SCORE SHEET

(50 pts.)

Proper Cooling Out (Maximum Score = 10 points)

	Comments
Watering (4)	
Sponging (3)	
Control (horse trained to stand) (2)	
Safety (1)	

Courtesy (Maximum Score = 10 points)

	Comments
Consideration of Others (5)	
Attitude (5)	

Proper Gait for Terrain & Pacing of Horse (Maximum Score = 10 points)

	Comments
Control (3)	
Balance (2)	
Hands, Seat and Leg Aids (2)	
Rating (including awareness & elapsed time)(3)	

Horsemanship on Trail (Maximum Score = 10 points)

	Comments
Crowding & Bunching (5)	
Encourages & Assures Horse (5)	

Horsemanship Prior To & After the Ride (Maximum Score = 10 points)

	Comments
Mounting (2)	
Dismounting (2)	
Saddle/Blanket Set & Cinch (3)	
Response to Direction (1)	
Tying (security) (2)	

TOTAL POINTS

NJ 4-H COMPETITIVE TRAIL RIDE OBSTACLE JUDGE GUIDELINES

All obstacles will have an red/orange flag on the right and a white/yellow one on the left. Riders must pass between these flags to complete the obstacle successfully.

Each rider will be given **TWO** opportunities to complete the obstacle. After the 2nd refusal*, the rider must yield to any on-coming riders so as not to impede their progress. The rider may than again attempt the obstacle or choose to by-pass and proceed on with an appropriate loss of points for that obstacle. The maximum number of attempts at each obstacle is **FIVE**. Each refusal is a deduction of 1 point from the final obstacle score.

*A refusal is – as the horse approaches the obstacle, it either stops or hesitates **AND** then takes at least one step **backwards** from the obstacle – **OR ducks out to the side** of the obstacle.)

Shying is not totally bad unless it is frequent and followed by spinning and/or bolting.

Crowding the lead horse or any action endangering either horse or rider will result in **penalty of at least two (2) points**.

If a rider has to be corrected by the Obstacle Judge for off course or safety reasons, there will be one (1) point deducted from the score for each offense.

The last column on the obstacle score sheet is for “Sportsmanship.” Place a (+) in the column if the rider displayed extremely good sportsmanship, a (-) for bad sportsmanship or a (0) if nothing out-of-the-ordinary happened.

POINTS SYSTEM FOR OBSTACLES

- | | |
|---|---|
| 5 | Hesitates, then goes on; or goes forward willingly. |
| 4 | Stops, but then goes on with a bit of urging or coaxing |
| 3 | Stops or weaves approaching obstacle. Needs to be ridden firmly with crop and/or spurs. |
| 2 | Spins, wheels, backs, doesn't listen to rider. Bit of a fight. |
| 1 | Needs lead over from another horse/rider. |
| 0 | Horse led by rider, or did not negotiate obstacle. |

TPRs Little Helper

Horse's Resting Pulse	=	_____
Horse's Resting Respiration	=	_____
Horse's Resting Temperature	=	_____

Normal Resting Parameters

Heart Rate 26 – 42
Respiration 8 – 16
Temperature 98 – 101

Parameters for Using a Heart Monitor

Walk Pulse 60 – 80
Trot Pulse 80 – 110
Canter Pulse 110 – 140
Gallop Pulse 160 – 200
Pulse should never exceed 200

Interval Training 180 – 200 five minutes at a time.

Metabolic Checks

Gums – Should be pink to yellow-pink and moist pink should refill quickly after pressing
Gut – should hear sounds on both sides

Skin Patch – Taken at point of shoulder & should be
Elastic & snap back quickl

Anal Tone – should be like sticking finger into marshmallow.

Directions

Using second hand on a watch count horse's P&R for 15 seconds
Multiply this number by 4 to get horse's P&R

Example: 13 beats for 15 seconds = 52 Pulse

Example: 6 respirations for 15 seconds = 24 Pulse

Recovery after Ten (10) Minutes

Pulse < 64

Respiration < 24

Temperature < 102

You should wait about ten (10) Minutes after ride completion to

Take P & Rs.

Temperature should be below 102 degrees.

If P & R is elevated above 64/40, or temp is elevated – continue Cooling out horse.

Recheck T, P&R every ten (10) minutes until they fall below parameters.

Always keep a log of your miles, times, and T, P & R after each ride.

TRAIL HORSE DECLARATION FORM

(To be completed prior to initial vet-check by 4-H'er and given to Veterinarian during initial check.
Form to be kept by Veterinarian)

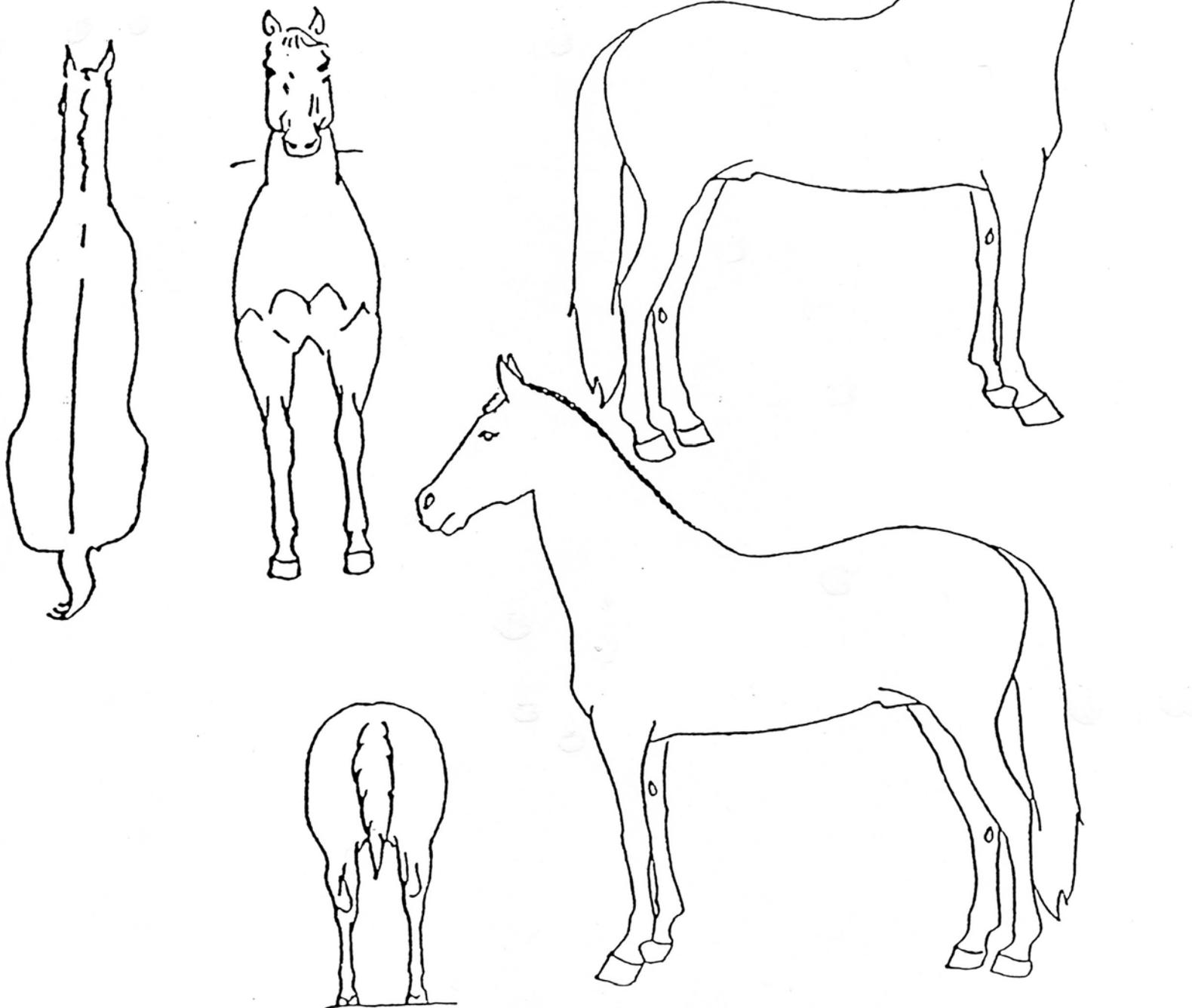
DECLARATIONS

Name _____

Horse _____ Age _____

Breed _____ Color _____ Sex _____

Rider # _____



One "Declaration Sheet" must be filled out for EACH horse/rider combination.
Please see that each horse/rider combination gets a copy.

**2014 NJ 4-H 25 Mile Competitive Trail Ride
Team or Individual Registration Form**

County: _____

PLEASE NOTE SIZE OF TRAILER I.E., 2 HORSE, 4 HORSE ETC., ETC: _____

Please TYPE or PRINT NEATLY.

Rider's Name	Grade	1st Time rider y/n	Address	Horse's Name (please note if this is the first trail ride for this horse)	Sex	Breed
1.						
2.						
3.						
4.						
Captain						
I.						
I.						

List all other individual riders on another copy of this form.

Coach(es) Name (s) _____
 Address _____ Phone (Day) () _____ Evening) () _____
 _____ email: _____

This form will serve as certification that each entry listed above has met all requirements listed in the Rules of NJ State 4-H Competitive Trail Ride.

I verify that the above 4-H'ers are "Members in Good Standing" and have met all event criteria and a year to date record book with the Trail ride page current.

Agent/ _____

**2014 NJ 4-H 12 1/2 Mile Competitive Trail Ride
Team or Individual Registration Form**

County: _____

PLEASE NOTE SIZE OF TRAILER I.E., 2 HORSE, 4 HORSE ETC., ETC: _____

Please TYPE or PRINT NEATLY.

Rider's Name	Grade	1st Time rider y/n	Address	Horse's Name (please note if this is the first trail ride for this horse)	Sex	Breed
1.						
2.						
3.						
4.						
Captain						
I.						
I.						

List all other individual riders on another copy of this form.

Coach(es) Name (s) _____
 Address _____ Phone (Day) () _____ Evening) () _____
 _____ email: _____

This form will serve as certification that each entry listed above has met all requirements listed in the Rules of NJ State 4-H Competitive Trail Ride.

I verify that the above 4-H'ers are "Members in Good Standing" and have met all event criteria and a year to date record book with the Trail ride page current.

Agent/Program Associate Signature : _____ Date: _____
 Program Associate Signature : _____ Date: _____



New Jersey 4-H Event Permission Form for Youth



Both sides of this form must be completed by all youth participating in overnight activities, field trips, events requiring group transportation, and any other events sponsored through the 4-H Youth Development Program where it is deemed necessary by the event coordinator(s) (paid 4-H staff and/or registered 4-H volunteer) responsible for the youth participants. The form should be submitted prior to the event. The form has five parts: (1) information about the participant and activity, (2) parental permission and liability release, (3) medical emergency authorization and health information, and (4) code of conduct and (5) media policy. *Be sure to complete all five parts and sign where requested!*

Information about the Youth Participant and Activity

Name of Youth participant: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone number: (____) _____ Email Address: _____

4-H county: _____ Birthdate: _____ Grade: _____

Name of activity/event: _____

Name of 4-H group sponsoring or participating in this event: _____

Location of event: _____

Date and time of participation of individual named above: _____

Parent Permission and Release of Liability

I hereby give my son/daughter named above permission to participate in the event listed. Although Rutgers Cooperative Extension and its event coordinator(s) will use the utmost precaution in guarding the health of the above participant and preventing accidents, I release them from any liability in case of illness or injury as a result of this activity. Furthermore, I release the owner and driver of the car transporting my child to and from the event, from any liability in case of illness or injury.

Sign Here

Signature of parent or guardian: _____

Medical Emergency Authorization and Health Information

I authorize the event coordinator(s) to dispense the prescription drugs and/or over the counter medications listed below in accordance with the instructions provided on the label (prescription drugs) or below (over-the-counter medications). In case of sudden illness or an accident to the above named participant requiring immediate treatment or surgery while he/she is a participant in this activity, I authorize the 4-H chaperone(s) to take such action as seems appropriate to protect the health and physical well-being of the above participant. This authority extends to any physician(s) and/or surgeon(s) selected by the event coordinator(s) to perform medical and/or surgical procedures including examinations and tests necessary to preserve the health and physical well-being of the above named participant. All efforts will be made to contact the parent(s) or guardian(s) in case of emergency.

_____	_____	_____	_____
Name of parent/guardian	Phone number	Name of additional emergency contact	Phone number

The following information is provided as an aid to the event coordinator(s) in dealing with the well-being of the participant. The participant has the following health conditions: (include allergies, handicaps, diabetes, pregnancy, asthma, medications needed, etc.).

Health conditions: _____

Medications/Instructions: _____

Health Insurance: Company Group# _____ ID# _____

Sign Here

Signature of parent or guardian _____

Continued on other side

New Jersey 4-H Code of Conduct

The primary purpose of the New Jersey 4-H Code of Conduct is to ensure the safety and well-being of all participants at 4-H sponsored events and activities. It applies to all participants, with participants defined as 4-H members, their parents, and volunteers.

As a participant in the 4-H program, I will:

- **Conduct myself in a courteous manner and treat members, parents, 4-H volunteers, Extension staff, judges and others with respect. Appropriate language and behavior are expected at all times.**
- **Respect and adhere to the rules and guidelines of the 4-H program including all those specific to a 4-H event or activity.**
- **Uphold an individual's right to dignity by supporting an environment of inclusion which welcomes involvement of participants from all backgrounds.**
- **Accept supervision and support from county and state 4-H staff while participating in the 4-H program. This includes acceptance of supervision and support from appointed 4-H volunteers coordinating 4-H events and activities.**
- **Obey local, state and federal laws.**

Participants who fail to adhere to the New Jersey 4-H Code of Conduct are subject to a range of disciplinary actions. Such actions will be taken in compliance with the New Jersey 4-H Discipline Policy and Procedure. When appropriate, immediate corrective action will be taken at the 4-H event to ensure the safety and welfare of all participants.

I understand if I fail to adhere to the above Code of Conduct, I will be subject to disciplinary action and potentially prohibited from attending and participating in the New Jersey 4-H Youth Development program.

	_____	_____
	Signature of participant in event	Date
	_____	_____
	Signature of parent or guardian	Date

New Jersey 4-H Media Policy and Release

The 4-H program routinely promotes activities through various media. This includes, but is not limited to newsletters, newspapers, brochures, and displays. In doing so, the names and photos of members may be included to help tell the 4-H story. However, New Jersey 4-H policy is that on web sites, youth in photos will not be identified by name(s).

- No, do not use my individual picture for any purpose.** I will make an effort to avoid opportunities to be in group photos.
- No, do not use my name for any purpose.**

Revised: January 2013

New Jersey 4-H Release/ Agreement Form for Adults



Both sides of this form must be completed and signed by all adults participating in 4-H overnight activities, field trips, and events requiring group transportation where youth are present, or any other events sponsored through the 4-H Youth Development Program as determined by the event coordinator. The form should be submitted prior to the event.

Information about the Adult Participant and Activity

Name of Adult participant: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone number: (____) _____ Email Address: _____

4-H county: _____ Have you gone through the appointed volunteer process? Yes No

Name of activity/event: State 4-H Trail Ride

Name of 4-H group sponsoring or participating in this event: 4-H Youth Development Department

Location of event: Cumberland County Fairgrounds

Date and time of participation of individual named above: October 11- 12, 2014

Release of Liability

Although Rutgers Cooperative Extension and its event coordinator(s) will use the utmost precaution in guarding the health of all participants and preventing accidents, I release them from any liability in case of injury as a result of this activity. Furthermore, I release the owner and driver of the car transporting me to and from this event, from any liability in the case of illness or injury.

Sign Here → Signature of adult participant _____

Medical Emergency Authorization and Health Information

In case of sudden illness or an accident to myself requiring immediate treatment or surgery while I am a participant in this activity, I authorize the 4-H event coordinator or other adults present to take such action as seems appropriate to protect my health and physical well-being. This authority extends to any physician(s) and/or surgeon(s) selected to perform medical and/or surgical procedures including examinations and tests necessary to preserve my life and well-being. All efforts will be made to contact the individual named as my emergency contact above in case of emergency.

_____	_____	_____	_____
Name of emergency contact	Phone number	Name of additional emergency contact	Phone number

The following information is provided as an aid to the event coordinator in dealing with my well-being. I have the following conditions (include allergies, handicaps, diabetes, pregnancy, asthma, medications needed, etc.):

Health conditions: _____

Medications/Instructions: _____

Health Insurance: Company Group# _____ ID# _____

Sign Here → Signature of adult participant _____

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As a participant in the 4-H program, I will:

- **Conduct myself in a courteous manner and treat members, parents, 4-H volunteers, Extension staff, judges and others with respect. Appropriate language and behavior are expected at all times.**
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- **Obey local, state and federal laws.**

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I understand if I fail to adhere to the above Code of Conduct, I will be subject to disciplinary action and potentially prohibited from attending and participating in the New Jersey 4-H Youth Development program.



Signature of participant

Date

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- No, do not use my individual picture for any purpose.** I will make an effort to avoid opportunities to be in group photos.
 - No, do not use my name for any purpose.**
-

Revised: January 2013

Cooperating Agencies: Rutgers, The State University of New Jersey, U.S. Department of Agriculture, and County Boards of Chosen Freeholders. Rutgers Cooperative Extension, a unit of the Rutgers New Jersey Agricultural Experiment Station, is an equal opportunity program provider and employer.