

2022-2023 4-H Nova Scotia Registration



First Name:	Last Name:	Contact ID (Office)
Previous Name:	Birth:	Previous 4-H Involvement: Yes <input type="checkbox"/> No <input type="checkbox"/>
Preferred Pronoun:	Gender:	
Personal Phone:	Personal Email:	

Emergency Contact:	Emergency Contact Phone:
Relationship:	
Person with a disability or medical condition?	

4-H Member Tenure:	Volunteer Service Length:
Club:	County:
Contact Type*:	Personal Training**
<small>*Cloverbud 7-8, Member 9-21, 19+ Screened Volunteer (Complete Screening only) 19+ Trained Leader (Complete Screening & 4-H Training)</small>	<small>**First Aid/Food Handlers/Mental Health First Aid, please include expiry</small>

Household Name(s):	Household Phone Number:	
Civic Address:		
Town/City:	Province:	Postal Code:
<i>Mailing Address if not the same as civic:</i>		
Civic/PO Box:		
Town/City:	Province:	Postal Code:

Household Residence Type (Rural, Urban or Farm)	Household ID (office):
Primary Language:	Low Income (less than \$30 000 Y/N Optional):

<i>Caregiver (lives at same address):</i>	
Name:	Relationship:
Email Address:	Phone:
<i>Caregiver (lives at same address)</i>	
Name:	Relationship:
Email Address:	Phone:
Other members of your household registered in 4-H:	

A **Household** is the primary residence of the individual registering for 4-H and will receive communication from the 4-H office.

Guardian (Does not live at same address):

Name:

Relationship:

Email Address:

Phone:

Projects (Leading or participating in). Please include 1st Year Grade 10 Credit & 2nd Year Grade 10 Credit. For the horse project specify Light Horse English, Light Horse Western, Horse Basics, Miniature or Draft Horse.

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| 1. | 5. | 9. |
| 2. | 6. | 10. |
| 3. | 7. | 11. |
| 4. | 8. | 12. |

I have read, understand and agree to comply with the following:

(Please initial beside each item)

_____ Code Of Conduct for 4-H in Canada

_____ Participation Agreement

_____ Privacy Statement

_____ Media Release

_____ 4-H Canada Inclusion Statement

_____ Supervision Policy (Rule of Two)

_____ Duty to Report Policy

_____ 4-H Nova Scotia Instructions to Implement Communications and Virtual Meetings in an Electronic Environment

Signature:

Print:

(Cloverbud, Member, Screened Volunteer or Trained Leader)

Parent or Guardian Signature for members under 19 Years of Age: _____

Print: _____

Date : _____