

4-H NOVA SCOTIA REGISTRATION – LEADER/VOLUNTEER FORM



IMPORTANT: ALL LEADERS/VOLUNTEERS MUST REGISTER WITH THEIR CLUB OR COUNTY EACH YEAR. REGISTRATION IS SEPARATE FROM THE SCREENING PROCESS.

CLUB NAME: _____ COUNTY: _____

I AM A:

I AM REGISTERING AS (CHECK ALL THAT APPLY): GENERAL LEADER CLUB PROJECT LEADER
 COACH COUNTY PROJECT LEADER VOLUNTEER/CHAPERONE

NEW VOLUNTEER

RETURNING VOLUNTEER

VOLUNTEER INFORMATION	EMERGENCY CONTACT INFORMATION
FIRST NAME: _____	EMERGENCY CONTACT NAME: _____
LAST NAME: _____	PRIMARY PHONE #: _____
GENDER: _____	SECONDARY PHONE #: _____
DRIVER'S LICENSE: _____	
HOW MANY YEARS HAVE YOU BEEN A VOLUNTEER WITH 4-H NS? _____	PROJECT INFORMATION
STREET ADDRESS: _____	IF YOU ARE A PROJECT LEADER/COACH, LIST THE PROJECTS/TEAMS YOU ARE LEADING/COACHING BELOW: _____ _____
TOWN/CITY: _____ POSTAL CODE: _____	
PRIMARY PHONE NUMBER: _____	VOLUNTEER AGREEMENT
SECONDARY PHONE NUMBER: _____	I UNDERSTAND THAT TO REPRESENT MYSELF AS A 4-H NS VOLUNTEER/LEADER MY 4-H VOLUNTEER SCREENING STATUS MUST BE COMPLETE AND VALID. AS A 4-H NS VOLUNTEER I AM COMMITTED TO:
PRIMARY EMAIL ADDRESS: _____	<ul style="list-style-type: none"> ▪ COMPLETING THE 4-H NS SCREENING PROCESS ONCE EVERY 5 YEARS. ▪ PRODUCING MY 4-H NS VOLUNTEER CARD, SHOULD I BE ASKED TO SHOW EVIDENCE OF MY SCREENING. ▪ ABIDING BY THE 4-H NS CODE OF CONDUCT AND ACTING AS A POSITIVE ROLE MODEL. ▪ ACTING IN THE BEST INTERESTS OF THE 4-H MEMBERS, MY CLUB, MY COMMUNITY, MY COUNTRY AND 4-H NOVA SCOTIA.
ARE THERE ANY MEDICAL CONDITIONS, ALLERGIES, FAMILY CIRCUMSTANCES, CULTURAL REQUIREMENTS, DIETARY RESTRICTIONS OR OTHER CONCERNS THAT YOU WOULD LIKE TO MAKE 4-H AWARE OF THAT MIGHT IMPACT YOUR ABILITY TO FACILITATE ACTIVITIES WITH 4-H YOUTH? IF SO, PLEASE EXPLAIN HERE: _____ _____ _____	<p>I HAVE READ AND AGREE TO ABIDE BY THE ABOVE STATEMENTS. _____</p> <p style="text-align: right;"><i>Volunteer's initials</i></p>

CLUBS AND COUNTIES RETURN COMPLETED REGISTRATION FORMS TO 4-H NS BY MAIL: ATTN: REGISTRATION, 60 RESEARCH DRIVE, BIBLE HILLS, NS B6L 2R2
 BY EMAIL: CAROLYN.GIBSON@4HNOVASCOTIA.CA OR BY FAX: 902-843-3989. IF YOU HAVE QUESTIONS PLEASE CALL 4-H NS AT 902-843-3990

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<p>MEDIA RELEASE:</p> <p>Throughout the 4-H year members, leaders, parents, 4-H NS and those contracted by 4-H NS may take photos and/or video of youth participating in 4-H activities. 4-H NS and/or 4-H Canada may share your photo/video, name, 4-H club name, the name of the county and community you are from on their websites, social media platforms, in print and other media for the purposes of preserving memories and promoting 4-H. Please note that 4-H NS cannot be responsible for images or media that is shared on the internet or in publications beyond its control.</p> <p><input type="checkbox"/> Yes I consent to the use of images of myself for the purposes as described above.</p> <p><input type="checkbox"/> No I do not consent to the use of images of myself for the purposes as described above.</p>	<p>COMMUNICATION PREFERENCES</p> <p>4-H Nova Scotia distributes regular updates to its general membership regarding important dates, changes and opportunities.</p> <p><input type="checkbox"/> YES, I WOULD LIKE TO RECEIVE THE 4-H NS UPDATES.</p> <p><input type="checkbox"/> PLEASE DO NOT SEND ME THE 4-H NS UPDATES.</p>
<p>4-H NOVA SCOTIA CODE OF CONDUCT</p> <ul style="list-style-type: none"> ▪ Our motto is “Learn By Doing”. Parents are encouraged to coach or lend a hand, if necessary, but members are expected to do their own project work. ▪ All solely 4-H Nova Scotia events where minors are present will be alcohol free. ▪ Underage drinking, use of illicit drugs and public intoxication will not be tolerated at 4-H NS events. ▪ Please keep cell phone usage to a minimum when at 4-meetings. ▪ 4-H members, leaders, parents and caregivers will conduct themselves in a courteous and respectful manner. They will exhibit good sportsmanship and will be positive role models to others. ▪ Respect the judge’s opinions and knowledge. Learn from the experience of being judged. ▪ Abuse by physical and non-physical means, or through communication, real or perceived, is not acceptable behavior. Profane or offensive language will not be tolerated. ▪ Remember that leaders are volunteers. Please respect the time that they are giving. Always try to thank them. ▪ Non-observance towards any of these guidelines may result in disciplinary action as determined by 4-H Nova Scotia. <p>I have read, understand and agree to the above Code of Conduct. _____ <i>Volunteer’s initials</i></p>	<p>PARTICIPATION AGREEMENT</p> <p>I understand that participation the 4-H NS program is voluntary and some activities may involve inherent risks. I am enrolling myself in 4-H understanding the inherent risks in some activities and agree that I will follow all safety rules and processes in place at 4-H activities and events that I might attend.</p> <p>I have read and understand the above statement. _____ <i>Volunteer’s initials</i></p> <p>INCLUSIVENESS AND DIVERSITY STATEMENT</p> <p>4-H Nova Scotia is committed to valuing the diversity of the communities and youth it serves and promoting inclusive principles throughout our organization. We will strive to accommodate all youth regardless of their gender, ethnicity, religion, sexual orientation, or potential challenges to participation.</p> <p>PRIVACY STATEMENT</p> <p>The 4-H Nova Scotia program protects your personal information by adhering to the “Freedom and Protection of Privacy Act” and other legislative requirements with respect to your privacy. We use, and when necessary may share, your information with 4-H program partners. This information is used to keep you informed and provide you with 4-H program activities and services, to satisfy government and regulatory obligations, and for statistical purposes. By completing and signing this document you understand and are consenting to the use of and sharing of necessary information as described above. For more information contact 4-H Nova Scotia by letter at 60 Research Drive, Bible Hill, NS B6L 2R2 or by email at robin.benedict@4hnovascotia.ca.</p>

Volunteer’s signature

Date

**BOTH SIDES OF THIS REGISTRATION FORM
MUST BE FILLED OUT IN ORDER TO BE
REGISTERED WITH 4-H NS.**