

Camp Dates for Teen Counselors: June 22<sup>nd</sup>-27<sup>th</sup>, 2014

4-H Camp McCandless at Camp May Mac, Felton, CA



University of California

Agriculture and Natural Resources | 4-H Youth Development Program

**MONTEREY COUNTY 4-H CAMP TEEN COUNSELOR APPLICATION (ages 14-18 & in 9<sup>th</sup>-12<sup>th</sup> grade.)**

Name \_\_\_\_\_ Club \_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone (H) \_\_\_\_\_ (W) \_\_\_\_\_ Age \_\_\_\_\_

Age as of 12/31/13

Family Doctor \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

In Case of Emergency, Notify: Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone (H) \_\_\_\_\_ (W) \_\_\_\_\_

**EXPERIENCE**

Shirt Size (Adult) \_\_\_\_\_

Please describe your 4-H and non 4-H camping experiences.

\_\_\_\_\_  
\_\_\_\_\_

**EDUCATION**

Name of High School \_\_\_\_\_ Year in School \_\_\_\_\_

**\*REQUIRED-FOR TEEN COUNSELOR ONLY\***

This member is in good standing, is at least 14 years of age as of December 31<sup>st</sup> of the current 4-H year.

\_\_\_\_\_  
Community Club Leader Signature Date:

\_\_\_\_\_  
4-H Staff Signature Date:

**Current 4-H and/or School Involvement**

Please describe your leadership experiences. Describe your teamwork, leadership, and communication skills.

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**Personal Comments**

In the space provided, please describe why you are interested in being a Teen Counselor.

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**Required Signatures**

I understand that as a Teen Counselor, I will need to attend the Camp Meetings, and devote the time necessary to complete the tasks that I have accepted with such position.

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**Signature of Applicant** \_\_\_\_\_

**Signature of Parent/Guardian** \_\_\_\_\_

**PLEASE RETURN THIS COMPLETED APPLICATION TO THE INTERVIEW MEETING**

**TEEN COUNSELORS-INTERVIEWS FEB. 10<sup>TH</sup>, 2014: 6:30 PM, 1230 Luther Way, Our Savior Lutheran Church**



The 4-H Policy Handbook tells me my rights as a 4-H member, and the rules I have to follow. 4-H calls the most important rules for members the "Code of Conduct". When members follow the Code of Conduct, it helps keep 4-H safe and fun for everyone.

**I will follow the 4-H Code of Conduct (rules) and I will:**

1. Be nice, kind, helpful, and respectful to other 4-H members; and to adult volunteers, youth leaders, 4-H staff, and other adults in charge.
2. Be honest, honor my commitments, and accept responsibility for my choices.
3. Use language that is respectful and kind. Not use curse words.
4. Wear appropriate clothes that are allowed by 4-H rules.
5. Not use tobacco, alcohol, or drugs (unless my doctor gives them to me).
6. Not bother or attack others, not carry or use a weapon; and not do anything else illegal or unsafe.
7. Know that adults can search my things (like my backpack) if they think I might have broken the 4-H rules.
8. Not touch anyone in a way that is too affectionate, and not engage in sexual behavior.
9. Follow the 4-H *Guidelines for Social Media* - <http://www.ca4h.org/files/133821.docx>.
10. Not do things outside of 4-H that are harmful to anyone in 4-H or the 4-H program.

**While attending 4-H overnight events I will:**

1. Be in my room when I'm supposed to be there.
2. Not leave the grounds unless an adult in charge gives me permission, and only if there are two adults with me.
3. Not be in the girls' sleeping area if I'm a boy, not be in the boys' sleeping area if I'm a girl, and not invite any kids who aren't 4-H members into the sleeping areas.
4. Be responsible for any damage caused by my actions.
5. Follow all the rules for that event.

**Consequences**

Anyone who sees someone break the Member Code of Conduct should tell the adult in charge right away. That adult will tell that member's parent or guardian. Consequences for breaking the 4-H rules may include:

1. Sending the member home.
2. Having the member meet with 4-H adults, talk about how the member can learn from what they've done, and decide what the member should do to make up for any harm done.
3. Charging the member (or their parents/guardians) for the cost of repairs to property that the member damaged.
4. Giving the member a warning, barring them from future events, suspending their membership, or terminating their membership.
5. Taking the member to the nearest law enforcement agency or other proper authority.

**Photograph and Information Release**

I give to The Regents of the University of California, National 4-H Council, National 4-H Headquarters (USDA), Cooperative Extension and units, its nominees, agents, and assigns, unlimited permission to copyright and use, publish, and republish for purposes of advertising, public relations, trade, or any other lawful use, information about me and reproduction of my likeness (photographic or otherwise) and my voice, whether or not related to any affiliation with 4-H, with or without my name. I hereby waive any right that I (and minor) may have to inspect or approve the copy and/or finished product or products that may be used in connection therewith or the use to which it may be applied.

By signature, the parent/guardian of said minor consents and agrees, individually and as parent or guardian of the minor, to the foregoing terms and provisions.

County: \_\_\_\_\_

Signature of Member: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_



University of California Division of Agriculture and Natural Resources

4-H Youth Development Program

Youth Treatment Authorization Form

This Treatment Authorization Form is authorized for all 4-H Youth Development meetings and activities during the dates specified below: (Please Note: This information must be updated annually)

Form with input fields for First Name, Last Name, Club/Unit Name, County and State, and Dates (From/To).

While my child is attending or traveling to or from this 4-H function, I HEREBY AUTHORIZE THE 4-H ADULT VOLUNTEER OR 4-H STAFF MEMBER, or in his/her absence or disability, any adult accompanying or assisting him/her, TO CONSENT TO THE FOLLOWING MEDICAL TREATMENT FOR SAID MINOR:

Any x-ray examination, anesthetic, medical or surgical diagnosis or treatment, and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and/or surgeon licensed under the provisions of the Medical Practices Act, California Business and Professions Code Section 2000 et seq.;

This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California. This authorization shall remain effective until my child completes his/her activities in this program unless sooner revoked in writing.

EMERGENCY CONTACT INFORMATION

Form with input fields for Name, Relationship to Youth Identified Above, Emergency Day Phone, Emergency Night Phone, Mailing Address, City, State, and Zip.

AUTHORIZATION AND CONSENT AND RELEASE

I hereby certify that my child is in good health and can travel to and participate in all functions of the 4-H Youth Development Program as described above. I understand it is my responsibility to keep the information on this form updated (including Health History and parent/guardian status) by contacting the County 4-H Office.

Form with input fields for Signature of Parent/Guardian and Date.

NON-CONSENT

I do not desire to sign this authorization and understand that this will prohibit my child from receiving any non-life threatening medical attention in the event of illness or accident.

Form with input fields for Signature of Parent/Guardian and Date.

University policy and the State of California Information Practices Act of 1977 require the following information be provided when collecting personal information from you: The information entered on this form is collected under authority of the Smith-Lever Act. Submission of the medical data is voluntary. However, a signature is required on one or the other of the two signature lines above.

PAGE SUBMITTED TO AND RETAINED BY THE 4-H CLUB/UNIT LEADER



**University of California, Division of Agriculture and Natural Resources  
4-H Youth Development Program  
Health History Information**

First Name

Last Name

 /  / 

County

Date of Birth

Subject to:	YES	No	Now Have or Have Had	Yes	No
Colds			Heart Trouble		
Sore Throat			Asthma		
Fainting Spells			Lung Trouble		
Bronchitis			Sinus Trouble		
Convulsions			Hernia (rupture)		
Cramps			Appendicitis		
Allergies			Has appendix been removed?		
Wear corrective lenses?			Do you walk in your sleep?		
Is hearing good?					

Date of last Tetanus Vaccination:

Please check over-the-counter medications that may be administered:

- Tylenol     Ibuprofen     Cough Syrup     Decongestant     Dramamine  
 Antacid     Polysporin     Hydrocortisone     Other:

Please identify allergies including allergies to food, medications, and drug reactions:

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Please list any disability accommodations you will need in order to participate in this program or activity.

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Please list all current medications:

Name of Medication	Dosage	Times Taken

Please include any additional remarks and special instructions to better assist emergency service personnel.  
Please explain "yes" answers on this page.

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## 4-H Summer Camp Dress Code

During your stay at the 4-H Summer Camp, we want you to have the best experience possible. The planning committee has developed the following dress code to assure that no one will feel offended or uncomfortable during his or her stay.

If you choose to dress inappropriately, you will be asked to change, or be required to wear a camp-issued shirt. By planning ahead and packing appropriately, you will save yourself the inconvenience of having to change and you will be contributing to a pleasant camp atmosphere.

Please be advised that the following dress code will be enforced for all individuals attending the camp, including staff, counselors and chaperones.

- 1 Clothing: All clothing shall be neat, clean, and acceptable in repair and appearance and shall be worn within the bounds of decency and good taste as appropriate for 4-H events.
- 2 Articles of clothing which display profanity, products, or slogans which promote tobacco, alcohol, drugs, sex or are in any other way distracting, are prohibited.
- 3 Excessively baggy or tight clothing, and clothing which advertises gang symbols or affiliation is prohibited.
- 4 Items of clothing which expose bare midriffs, bare chests, undergarments, or that are transparent (see-through) are prohibited. Tank tops with straps wider than one inch are permitted. Please be advised that spaghetti straps, shirts which expose a bare back, halter tops, and tube tops are prohibited.
- 5 Swimming (For all water recreation): -Swimsuits for men: swim trunks only (No shorts, cut-off pants, or Speedos). -Swimsuits for women: One-piece suits recommended, however, two-piece suits are allowed as long as they are modestly cut. No string, thong or crochet suits will be allowed. Swimsuits may only be worn during swimming activities.

### Dress Code Violations



Drawn by Cynthia Sperry 2003