

2021 4-H FAIR ADULT VOLUNTEER PERMISSION/ HOLD HARMLESS FORM

This form is to be completed and signed by all 4-H adult volunteers who will be taking part in events and activities at the Warren County Farmers' Fair. It must be submitted to the 4-H office prior to Fair. It will be kept on record through the calendar year of Fair. BOTH PARENTS OF A CHILD CAN BE INCLUDED ON ONE FORM – but both must sign the form.

INFORMATION ABOUT THE ADULT VOLUNTEER

Name: _____

Address: _____

Telephone#: (Home) _____ (Cell) _____

Emergency Contact: _____

Telephone #: (Home) _____ (Cell) _____

Primary Club: _____

Other Clubs: _____

RELEASE OF LIABILITY

I will be volunteering for 4-H at the Warren County Farmers' Fair from 7/31/21 to 8/7/21. Although Rutgers Cooperative Extension of Warren County, its registered adult 4-H volunteers, the Warren County 4-H Leaders' Association, Inc., and the Warren County Farmers' Fair Association will use the utmost precautions in guarding my health and safety, I release them from any liability in the case of illness or injury as a result of participation in 4-H events/activities of the Warren County Farmers' Fair.

4-H ADULT VOLUNTEER BEHAVIOR AGREEMENT

*The 4-H Code of Behavior outlined below applies to all adults who participate in 4-H activities related to the Warren County Farmers' Fair. It is necessary for the protection of those present and for the protection of the 4-H organization from any justifiable criticism or liability. **All adults are also expected to adhere to the New Jersey 4-H Code of Conduct.***

1. All participants will abide by the 4-H Youth Development, Rutgers Cooperative Extension and NJ State policies and the appropriate project area guidelines in which they/their children are enrolled, including following the fair youth supervision policies.
2. All participants are expected to uphold the name of 4-H in all their actions, including appropriate dress, appropriate language and appropriate conduct.
3. Participants are expected to respect the individuality of all persons, to treat others with respect and kindness, and to consider their needs as well as their own.
4. Adults are expected to be models of appropriate behavior for youth and to treat youth and other adults with respect at all times. Any conflict between adults should be handled away from youth.
5. Adults, 18 and over, are not to smoke in the tents or within 10 feet of tents or 4-H buildings.
6. It is forbidden to be in the possession of or to consume, ingest, or inhale any intoxicating beverage or drug.
7. Destroying exhibits or taking that which does not belong to you is absolutely forbidden. This includes all exhibits on the Fair Grounds. If violation occurs on Fair Association property, in addition to 4-H consequences, the incident will be reported to the Fair Association.

Use of drugs, including alcohol, is not allowed on the Warren County Fair Grounds. Failure to comply with the above will result in the violator being removed immediately from the fairgrounds. The Warren County 4-H program has been requested by the Fair Association to report all violations to the appropriate authorities.

I understand and agree to the Middlesex County 4-H Association 4-H Code of Behavior and the New Jersey 4-H Code of Conduct. I also agree to perform my duties as explained and to abide by any other rules specific to this event. I understand that any action on my part that contradicts any portion of this agreement is grounds for immediate dismissal from this event at my own expense.

Signature _____

Date _____

MEDICAL EMERGENCY AUTHORIZATION AND HEALTH INFORMATION

Should I become incapacitated because of sudden illness or an accident requiring immediate treatment, please have me transported to the following hospital: _____

The following information is provided as an aid to emergency personnel/doctors in the event of my incapacitation. I have the following health conditions: (include allergies, disabilities, diabetes, asthma, and medications needed.)

Signature _____ Date _____

Health Conditions: _____

ACKNOWLEDGEMENT AND AGREEMENT

- I understand that when participating in this RCE/4-H activity I will be required to follow rules and protocols designed to help keep everyone safe and well. These rules may include wearing a mask or face covering around children, practicing physical distancing, washing, or sanitizing hands, and cleaning and disinfecting surfaces, equipment, and materials. I agree, to follow all rules, procedures, and protocols as directed by the leader(s) of the RCE activity and understand that failure to do so may result in my dismissal from the activity.
- I acknowledge and understand that my participation in this in-person RCE activity is voluntary and I am not required to participate. I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19, and that such exposure or infection may result in personal injury, illness, permanent disability, or death. I voluntarily assume all risk of illness, injury, loss, and/or damage to person or property in any way associated with my participation in this RCE activity.
- If I am diagnosed with COVID-19, I will notify my local RCE/4-H program so they are prepared to assist with state contact tracing efforts as requested. I understand the RCE/4-H program may alert others who attended this 4-H Activity that COVID-19 exposure has occurred, and that such notification will not identify me/my child as the source. I will cooperate with state and local health officials to provide necessary information about the individuals with whom I/my child had close contact during the 48 hours prior to experiencing symptoms. If I am notified I/my child was exposed to COVID-19 at a RCE Activity I will participate in state contact tracing efforts, including responding to communications from contact tracing personnel.
- To the fullest extent permitted by law, I hereby release and forever discharge, and agree not to sue and to indemnify and hold harmless, the State of New Jersey, Rutgers University, Rutgers Cooperative Extension and their governing boards, officers, agents, employees and volunteers from and against any and all liabilities, claims, demands and causes of action of any kind on account of any illness, injury, loss or damage to person or property in any way arising out of or relating to my/or my child's conduct of or participation in RCE activities.

Signature of adult participant: _____

Print Name: _____ Date Signed: _____