



WYOMING

Wyoming 4-H Volunteer Enrollment 2011

Last Name: _____ First: _____ MI: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: () _____ Alternate Phone: () _____ SSN: _____

E-mail address: _____ Gender: Male Female

4-H Alumni: Yes No Volunteer Leadership Years: _____

Leader Type (check primary area):
 Project Leader Club Leader Activity / Event Leader Key Leader

Hispanic Ethnicity: (check one): Yes - Hispanic or Latino Ethnicity - OR - No - Not Hispanic or Latino Ethnicity

Racial groups: (check all that apply):
 White Black or African American
 American Indian or Alaskan Native Asian
 Native Hawaiian or Other Pacific Islander

Residence (check one): Farm Rural non-farm or town less than 10,000
 Town/City 10,000 to 50,000 Suburb City over 50,000

Clubs [Code Name]

1: _____ 2: _____ 3: _____

Projects [Code Name (Year In Project)]

1: _____ 2: _____ 3: _____
4: _____ 5: _____ 6: _____

4-H Volunteer Leader Agreement

When serving as a University of Wyoming Extension Service Volunteer, I promise to:

- Accept my responsibility to represent my county and University of Wyoming Extension programs with dignity and pride by being a positive role model for youth.
- Conduct myself in a courteous, respectful manner and exhibit good sportsmanship.
- Adhere to and enforce the rules, policies, and guidelines established by the county and Extension youth programs.
- Refrain from the use of physical or verbal abuse.
- Refrain from inappropriate or unwanted touching of youth or adults.
- Refrain from destructive, offensive, or sexually inappropriate behavior.
- Refrain from the possession or use of alcoholic beverages or illegal drugs.
- Avoid smoking and use of tobacco products at 4-H events when youth are present.
- Respect the property of others, including clothing, personal items, equipment, and facilities.
- Operate machinery, vehicles, and other equipment in a responsible manner.
- Accept the responsibility to promote and support the University of Wyoming Extension Service to develop an effective club, county, state and national program.

As a 4-H Leader, I agree to fulfill my volunteer responsibilities to the best of my ability and in a manner consistent with the mission of the University of Wyoming Extension Service. I give permission for photos or videotapes of myself to be reproduced and utilized for 4-H promotional or educational purposes.

Signature _____ Date _____

Issued in furtherance of Cooperative Extension work, acts of May 8 and June 30, 1914, in cooperation with the U.S. Department of Agriculture. Glen Whipple, Director, Cooperative Extension Service, University of Wyoming, Laramie, Wyoming 82071.

Persons seeking admission, employment, or access to programs of the University of Wyoming shall be considered without regard to race, color, religion, sex, national origin, disability, age, political belief, veteran status, sexual orientation, and marital or familial status. Persons with disabilities who require alternative means for communication or program information (Braille, large print, audiotape, etc.) should contact their local UW CES Office. To file a complaint, write the UW Employment Practices/Affirmative Action Office, University of Wyoming, P.O. Box 3434, Laramie, Wyoming 82071-3434.