

**2011 SOUTHERN REGION 4-H VOLUNTEER FORUM
REGISTRATION**

Attendee Volunteer Extension

Last Name _____ First Name _____

County _____

Address _____

City _____ Zip _____

Home Phone (_____) _____ Cell (_____) _____

FAX (_____) _____ E-Mail _____

Gender Male Female Ethnicity _____

Emergency Contact & Phone _____

Is this your first visit to the SRVF? Yes No Adult Shirt Size S M L XL 2XL 3XL

- Do you plan to drive to the Arkansas 4-H Center? Yes No
- If yes, will you be driving your personal car or a county/state car or van?
 - Could you provide transportation for additional volunteers from your district? Yes No

Housing at the C.A. Vines Arkansas 4-H Center lodging rooms are hotel style with double, single, and bunk beds sleeping from 3 to 6 in rooms with total capacity of 425. A limited amount of "married" housing may be available, but we cannot guarantee this space. The private space must first be utilized for those with special needs and any remaining rooms will be assigned to married couples. If you have special housing needs, please contact, *Nancy Alexander* by phone at (334) 844-2219 or *alexana@auburn.edu*. List below any specific individuals with whom you wish to be housed. Room assignments are made prior to arrival to the 4-H Center. Every effort will be made to accommodate your wishes.

Payment *must* accompany registration forms with checks made payable to *ALABAMA 4-H FOUNDATION* Forms and payment should be forwarded to:

Southern Region 4-H Volunteer Forum, ACES/4-H
Attn: *Nancy Alexander, 4-H Volunteer Specialist*
203 Duncan Hall – Auburn University, AL 36849

Forum Registration Options

Full Time Conference Registration			
<input type="checkbox"/>	Full Time Delegate – Early bird Registration – DUE AUGUST 1, 2011	\$225.00	
<input type="checkbox"/>	Full Time Delegate – Regular Registration	\$250.00	
<input type="checkbox"/>	Full time Registration after 9/1/2011	\$275.00	
Early Arrival – Wednesday 10/5/2011			
<input type="checkbox"/>	Wednesday Night Lodging *No Meal(s) included	\$30.00	
<input type="checkbox"/>	Dinner – Wednesday PM *Meal Ticket necessary	\$9.50	
<input type="checkbox"/>	Breakfast – Thursday AM *Meal Ticket necessary	\$7.00	
<input type="checkbox"/>	Lunch – Thursday Noon *Meal Ticket necessary	\$8.00	
Early Arrival – Thursday 10/6/2011			
<input type="checkbox"/>	Breakfast *Meal Ticket necessary	\$7.00	
<input type="checkbox"/>	Lunch *Meal Ticket necessary	\$8.00	
Forum Registration by the Day			
<input type="checkbox"/>	Thursday – Forum and Dinner	\$35.00	
<input type="checkbox"/>	Thursday Night Lodging	\$30.00	
<input type="checkbox"/>	Friday – Forum and ALL Meals	\$65.00	
<input type="checkbox"/>	Friday – Forum ONLY	\$35.00	
<input type="checkbox"/>	Friday Night Lodging	\$30.00	
<input type="checkbox"/>	Friday – Forum and Dinner ONLY	\$45.00	
<input type="checkbox"/>	Saturday – Forum and ALL Meals	\$65.00	
<input type="checkbox"/>	Saturday – Forum ONLY	\$35.00	
<input type="checkbox"/>	Saturday Night Lodging (includes Sunday Breakfast)	\$38.00	
<input type="checkbox"/>	Saturday – Forum and Dinner ONLY	\$45.00	
Airport Transportation			
<input type="checkbox"/>	Roundtrip transportation	\$20.00	
TOTAL REGISTRATION DUE			

Arkansas 4-H Medical Information & Release

Southern Region 4-H Volunteer Forum

October 6-9, 2011

Name _____

Full Mailing Address _____

Phones Home _____ Cell _____ Work _____

Date of Birth _____ Gender _____

Please list the names of two adults who may be contacted in case of emergency.

Name _____ Home Phone _____ Work/Cell Phone _____

Name _____ Home Phone _____ Work/Cell Phone _____

Medical Information

Name of Physician _____ Phone _____

Health Insurance Co. name _____

Date of Last Physical Examination _____

List Medications currently being taken _____

Drug Allergies _____

Other Allergies _____

Describe any physical limitations _____

Describe any recent illness or injury _____

Is there a history of heart condition _____ diabetes _____ asthma _____ epilepsy _____ rheumatic fever _____

AGREEMENT:

I understand that should a health problem arise, my emergency contact will be notified but that if he or she can not be reached by telephone, such medical treatment, including surgery, as deemed necessary by competent medical personnel could be rendered; that such necessary information may be released for insurance purposes and that I understand the limitation of the coverage as indicated below. Furthermore, I am aware that participation in this event includes risk including, but not limited to, transportation to/from event, sports and recreational games, water activities, hiking, as well as risks that are not foreseeable. For the sole consideration of the Cooperative Extension Service's arranging for participation in 4-H programming, I hereby release and forever discharge The University of Arkansas, the Board of Trustees of the University System of Arkansas, their members individually, and their officers, agents and employees from any and all claims, demands, rights and causes of action of whatever kind that I may have, on my own behalf arising from or in any way connected with my participation in 4-H volunteer activities. I further covenant and agree that for the consideration stated above I will not sue the Institution, the Board of Trustees of the University System of Arkansas, its members individually, its officers, agents or employees for any claim for damages arising or growing out my participating in the program. I understand that the acceptance of this Release, Waiver of Liability, and Convent not to Sue the Board of Trustees of the University System of Arkansas shall not constitute a waiver, in whole or part, of sovereign immunity by said Board, its members, officers, agents, and employees. I certify that I am participating in the SRVF with my knowledge and consent. I have read and understand all of the above policies

Signature

Date

State _____



Consent and Release Form
Photographic, Video, Audio and Web Site

I do hereby consent and agree that the SR4-HVF and any of its affiliated groups and their staff have the right to use the photograph or recorded image that I am voluntarily providing. I understand that the image may be used in 4-H Youth Development educational or promotional materials. I further consent that my name and identity may be revealed therein or by descriptive text or commentary.

I do hereby release to the Southern Region 4-H Volunteer Forum and its staff all rights to exhibit this work publicly or privately, including posting it on a 4-H web site. I waive any rights, claims or interests I may have to control the use of my identity in association to the photograph and agree that any uses described herein may be made without compensation or additional consideration of me.

I represent that I have read and understand the foregoing statement and am competent to execute this agreement.

Name: _____ Signature: _____

Phone: _____ Date: _____

Full Mailing Address: _____

Email Address _____