



2011-2012

Family

Registration Form

<http://www.4hcanski.org>

Mail membership form with check to:
CANSKI Treasurer
116 Jones Rd
Washburn, WI 54891

County (check one) Bayfield Ashland

Membership fee \$55 Please enclose a check payable to **4-H CANSKI**. Scholarships are available.

Additional donation \$ _____ are tax-deductible and support youth Nordic ski programs.

May we contact you about volunteering? Yes No

Contact Information – Parent/Guardian

Last Name _____ First Name _____ M.I. _____

Mailing Address _____

City _____ State _____ Zip _____

Residence: Farm Rural non-farm or town less than 10,000

Home Phone _____ Primary Cell _____

Email Address _____ I'd prefer electronic communication Yes No

Birthday ____/____/____ (Most CANSKI communication takes place via email.)

Skiing interest (check all that apply) Recreational Racing Classic Skating Both

Parent/Guardian Signature _____ Date _____

#1 - Youth Information

Last Name _____ First Name _____ M.I. _____

Email Address _____ Birthday ____/____/____ Gender Male Female

Grade level _____ School name _____

Year in 4-H _____ Other 4-H Clubs? _____

Skiing interest (check all that apply) Recreational Racing Classic Skating Both

Ethnicity (check all that apply) Hispanic or Latino White Black or African American American Indian or Alaskan Native

Asian Native Hawaiian or Other Pacific Islander More than one race Other

T-shirt size (adult sizes) XS S M L XL XXL

#2 - Youth Information

Last Name _____ First Name _____ M.I. _____
Email Address _____ Birthday ____/____/____ Gender Male Female
Grade level _____ School name _____
Year in 4-H _____ Other 4-H Clubs? _____

Skiing interest (check all that apply) Recreational Racing Classic Skating Both

Ethnicity (check all that apply) Hispanic or Latino White Black or African American American Indian or Alaskan Native
 Asian Native Hawaiian or Other Pacific Islander More than one race Other

T-shirt size (adult sizes) XS S M L XL XXL

#3 - Youth Information

Last Name _____ First Name _____ M.I. _____
Email Address _____ Birthday ____/____/____ Gender Male Female
Grade level _____ School name _____
Year in 4-H _____ Other 4-H Clubs? _____

Skiing interest (check all that apply) Recreational Racing Classic Skating Both

Ethnicity (check all that apply) Hispanic or Latino White Black or African American American Indian or Alaskan Native
 Asian Native Hawaiian or Other Pacific Islander More than one race Other

T-shirt size (adult sizes) XS S M L XL XXL

Permissions

Yes No I grant the University of Wisconsin Board of Regents and University of Wisconsin Extension
(hereinafter University) the right to publish, and copyright my image (including audio, moving image or
photography) for educational programs, websites and promotion of University programs.

Yes No I want the University to keep my name and contact information private when creating a public record or list.

Yes No I require an accommodation for a disability to participate in this program.

Emergency Contact Information

Emergency phone numbers: _____
Family Physician _____ Phone _____ Clinic _____

Office use only

Membership paid \$ _____ Equip rental paid \$ _____ Scholarship? Date _____

2011-2012 4-H CANSKI 4-H FAMILY Agreement 4-H Cloverbud and Member Expectation Policy for 4-H Events

The Values of ACCOUNTABILITY, COMPASSION, RESPECT and HONESTY are represented by the acronym and representative image of an ARCH. Each club should take the time to define each value for themselves and then commit to upholding the ARCH to the best of their ability throughout the 4-H year.

ACCOUNTABILITY

- Following through with commitments and assigned duties or responsibilities.
- Coming to club functions on time and prepared to participate.

RESPECT

- For self, for others, or the group.
- For property and equipment and for adult leaders and legitimate authority.

COMPASSION

- Thinking of the needs of others, not just your own.
- Understanding the views, experiences, and uniqueness of others.
- Helping others to feel good about themselves.
- Being patient and tolerant of your own and others' mistakes.



HONESTY

- Willing to share and discuss your thoughts and feelings.
- Ability to reflect and assess your own strengths and weaknesses.
- Completing your record book accurately and without the direct assistance of an adult.
- Knowing what you are capable of doing and living up to your capabilities.

* Adults and youth will refrain from Tobacco, Alcohol and Drugs while participating in a recognized 4-H activity.

The Ashland County 4-H Leaders Association reserves the right to make adjustments to these policies.

I grant the University of Wisconsin Extension, the right to use, publish, and copyright this member's image (including audio, moving image or photograph) for educational programs, website, and promotion of the 4-H program. The University adheres to all Federal and State laws associated with this use. ____ Yes ____ No

We have read through these expectations and we agree to be bound by the terms of the 4-H Participant Agreement.

4-H'er Signature DATE

4-H'er Signature DATE

4-H'er Signature DATE

(Parent/Guardian Signature)



An EEO/Affirmative Action employer, University of Wisconsin-Extension provides equal opportunities in employment and programming, including Title IX and ADA requirements.

Requests for reasonable accommodations for disabilities or limitations should be made prior to the date of the program or activity for which it is needed. Please do so as early as possible prior to the program or activity so that proper arrangements can be made. Requests will be kept confidential.