# District 9 4-H Leadership Lab Guidelines June 27-29, 2017 Texas A&M Galveston

EVENT INFORMATION	Leadership Lab is a three-day, two-night leadership training for 4-H youth. Leadership Lab is designed to prepare District 9 4-H members for various leadership roles at the county, district, and state level. Participants gain valuable knowledge and skills they can take home and implement in their local county 4-H program. By combining work and play, activities are designed to explore creativity in leadership roles, enhance team building skills, and develop communication and public speaking skills.
LOCATION	District 9 4-H Leadership Lab will be held at Texas A&M Galveston in Galveston, Texas.  *Drop off will be at TAMU Galveston on Tuesday, June 27 <sup>th</sup> *Pickup will take place at the Galveston County AgriLife Extension Office on Thursday, June 29 <sup>th</sup> (4102-B Main Street (FM 519) La Marque, Texas 77568).  **Any vehicles staying on the campus premises will be required to purchase a parking permit.
TIME	Arrival and registration will begin at 9:00 am on Tuesday, June 27 <sup>th</sup> – eat breakfast prior to arrival Departure will be at 5:00 pm on Thursday, June 29 <sup>th</sup>
THEME	The theme for Leadership Lab 2017 is "Social Graces in 4-H Places". Activities will be coordinated around this theme.
COST	\$255.00/person for 4-H members, adult leaders, and county Extension agents. <b>No refunds will be given.</b> The cost covers lodging, meals, a t-shirt, and activity fees (unless otherwise indicated). Counties are responsible for transportation to and from Leadership Lab facilities.
REGISTRATION	All participants, chaperones, and agents MUST register on 4-H CONNECT (https://texas.4honline.com/) May 1 <sup>st</sup> - May 28, 2017. Late registration will be accepted through June 3rd for an additional \$50.00.

AGE REQUIREMENT	All senior aged youth (grades 9 <sup>th</sup> - 12 <sup>th</sup> as of August 31, 2016) may participate, including graduating 2017 seniors. Youth that have completed the 8 <sup>th</sup> grade as of Leadership Lab dates may also participate.
DRESS CODE	Attire for Leadership Lab is casual but 4-H appropriate. Items not allowed: *tops with spaghetti straps, halter type tops, shirts that reveal the midriff, excessively loose fitting pants or jeans, short shorts or skirts, clothing advertising or referencing alcohol, drugs, violence or having sexual content. * Two-piece swimsuits are allowed, but should adequately cover all body parts. We will end Leadership Lab with a lunch banquet, bring nice dress clothes this event.
WHAT TO BRING	<ul> <li>Bedding (pillow, sheets, and blankets), towels, washcloths, shower shoes, and any personal items needed. All participants (youth and adults) will be housed in dorm facilities.</li> <li>Clothes and shoes for active sports, swimsuits, water shoes, outdoor recreation and nightly dances.</li> <li>Light jacket or sweater in case of inclement weather or cold classrooms.</li> <li>Tennis shoes, boots or some other closed toe shoes that can get WET and DIRTY.</li> <li>Beach towel, sunscreen, hat, and mosquito spray</li> <li>Please do not bring valuable electronic equipment.</li> <li>A plastic bag or clothes bag to take home any wet clothes</li> <li>Bring Community Service Items – Flyer attached</li> <li>Banquet Attire – Slacks and ties for guys and dresses, skirts, blouses for girls</li> </ul>
MEDICAL INFORMATION	Each participant (youth AND adults, including CEAs) is required to bring the following forms with them to Leadership Adventure:  Campus Liability, Waiver, and Authorization for Medical Treatment Health Statement Code of Conduct Consequences of Misbehavior  Forms should be completely filled out, including ALL SIGNATURES  Two sets will be needed. One for the District office to keep on file and one for traveling purposes.

### OFFICER ELECTIONS

- Elections will be conducted at Leadership Lab on Thursday, June 29, 2017
- All nominees must complete and submit the officer nomination form (application), through their County Extension office, to the District Office by 5 p.m. May 30, 2017.
- Criteria for District 9 4-H Council nomination is on the form; please note the eligibility, age and enrollment requirements
- Each County may submit only 3 candidates, and have only 2 voting delegates (if they have 2 or more participants attending Leadership Lab)
- Everyone should be familiar with the District 9 Council By-laws.
- Any nominee running for a District officer is strongly encouraged to attend Pre-lab (June 16, 2017) to be considered as a teen leader during Leadership Lab. Those running will be notified of location and time
- Nomination form and by-laws can be found on the D9 Council Officer website or contact your county extension agent.

# Texas 4-H Youth Development 2016-2017 Code of Conduct



#### During my 4-H involvement...

Date

- 1. I am expected to attend all sessions that are part of the planned program for all activities. I will inform staff if I am not feeling well or have a schedule conflict.
- 2. I will dress appropriately to the occasion and adhere to any attire requirements stipulated for the event I am attending. 4-H members should be courteous and clean, and possess good manners.
- 3. Language must be controlled and appropriate for a 4-H member I will not use language that is socially offensive.
- 4. Except for planned tours and outings, I will not leave an activity facility any time without permission of the chaperone and/or staff responsible for the event.
- 5. I will not smoke or use tobacco products, or be in possession of such products, at any 4-H program event.
- 6. I will not be in possession of, use alcohol or drugs (except those directed by a doctor), or be associated with or remain in the presence of others when they are being used.
- 7. I will not be in possession of, use, or threaten another person with a weapon, bodily force or language.
- 8. I will respect the rights of privacy of those attending an activity and those with whom I may be rooming.
- 9. I will observe hours established by the staff and be in my room. No boys in girls' rooms, no girls in boys' rooms.
- 10. I will avoid unnecessary roughness to room furnishings, furniture, equipment, etc. Towels, ashtrays, etc., are not to be taken as souvenirs. Occupants of a room or conveyance are financially responsible for any damage or results of misconduct.

Date	Member Signature

11. Any participant at an official 4-H activity who observes a breach of the code of conduct has the

responsibility and obligation to report the misbehavior to appropriate chaperones.

Parent/Guardian Signature

## **Texas 4-H Youth Development Consequences of Misbehavior**

#### **Violators May Expect:**

To have the opportunity to explain actions to the professional Extension staff in charge.

Behavior that is disruptive to the event will be documented and a letter describing such will be sent to the District 4-H Leadership Team, County Extension Agent(s) and parents/guardians of those involved. Examples of offenses are as listed below, but not limited to:

#### Minor Offenses

- 1. Habitually late to program activities
- 2. Not in room at designated time
- 3. Not possessing good manners or use threatening, obsence, or sexual harassing language toward others
- 4. Not respecting the rights and privacy of those rooming with or attending an activity
- 5. Lying or untruthfulness to chaperones, leaders, event organizers or others in attendance

#### **Intermediate Offenses**

- . Inappropriate visitation
- Leaving a 4-H activity without the permission of staff member(s) in charge
- Intentional damage to meeting site, sleeping quarters, person, or other person's property
- Bullying

#### **Major Offenses**

- . Smoking or using tobacco products
- 2. The use of alcohol or drugs
- 3. Carrying an unauthorized weapon
- Threatening another person with a weapon or causing bodily harm
- Cheating
- 6. Sexual activities or harassment
- 7. Theft of any kind
- Acting in a manner considered by 4-H leadership to be harmful or potentially harmful to the health or well-being of themselves or others, whether such act occurred within, or outside of the 4-H program.
- 9. Violation of the law

#### Consequences

- For every offense 4-H member will receive a verbal reprimand.
- For every offense the violator shall write letters of apology to the appropriate people.

#### Major Offenses

- Automatic removal from event/activity and/or sending a participant home at the parent's/guardian's expense.
- One major offense during any 4-H year may lead to suspension of membership in all Texas 4-H Youth Development programs for the remainder of the 4-H year, along with the possibilities of facing criminal charges, pending offense. In addition, 4-H member may be asked to resign from all 4-H offices or leadership roles held or give up monetary awards or scholarships from the Texas 4-H program.

#### **Intermediate Offenses**

- One or two violations is grounds for removal from the event/activity and/or sending a participant home at the parent's/guardian's expense.
- Three violations during one calendar year is grounds for the 4-H member to not be allowed in any county, district or state activities for the remainder of the 4-H year. In addition, 4-H member may be asked to resign from all 4-H offices or leadership roles held or to give up monetary awards or scholarships from the Texas 4-H program.

#### Minor Offenses

- Consistent discipline problems requiring more than two reprimands is grounds for sending a 4-H member home at the parent's/guardian's expense.
- Habitual discipline problems requiring more than four reprimands during one calendar year is grounds for the 4-H member to not be allowed in any county, district or state activities for the remainder of the 4-H year. In addition 4-H member may be asked to resign from all 4-H offices or leadership roles held or to give up monetary awards or scholarships from the Texas 4-H program.

#### Course Of Action

Event managers responsible for 4-H events and activities are encouraged to communicate to 4-H participants and adult chaperones prior to the event a standard of acceptable behavior, via the Consequences of Misbehavior and Code of Conduct. Standards of behavior and consequences should be reviewed with participants as part of the initial orientation.

- 1. Event Manager obtains all the relevant facts.
- Brief the on-site adult responsible for the youth delegate (Extension faculty member or 4-H volunteer).
- 3. If not on-site, but available via phone, brief the county Extension faculty member and District Extension Administrator responsible.
- 4. Review consequences of misbehavior. The following steps should be taken when sending a 4-H member home:
  - Extension faculty member contacts parents.

Parents advised that child is being sent home by safest, most direct means, and that parents are responsible for cost.

 $\label{thm:continuous} \mbox{Event manager decides if parents should be given the option of picking up the child.}$ 

 $County\ Extension\ faculty\ member\ collects\ money\ from\ parent\ to\ pay\ transportation\ charges.$ 

Follow-up correspondence from event's manager to appropriate county Extension faculty member, District 4-H Leadership Team, child and parent for documentation.

5. For all reprimands a Summary Letter and Accident/Incident Report Form will be completed and mailed to the 4-H member, parent, County Extension Agents, District Extension Administrator, County Extension Directors (if applicable), 4-H Specialist, and Texas 4-H Youth Program Director.

 4-H Member Signature	County	District	Date	_
 dian of narge to carry out the Code of Conduct as d			I give permission to the	e professional
Pa	rent or Guardian	Date		

#### **Program Name**

# CAMP & ENRICHMENT PROGRAM WAIVER, INDEMNIFICATION, AND MEDICAL TREATMENT AUTHORIZATION FORM

1. EXCULPATORY CLAUSE. In consideration for receiving permission for my/my child's
participation in any and all activities of (herein referred to
participation in any and all activities of (herein referred to as "camp"), which is sponsored by, (herein referred to as
"sponsor"), I hereby release, waive, discharge, covenant not to sue, and agree to hold harmless
for any and all purposes sponsor, The Texas A&M University System, the Board of Regents for
The Texas A&M University System, Texas A&M University, and their members, officers, servants,
agents, volunteers, or employees (herein referred to as RELEASEES or INDEMNITEES) from
any and all liabilities, claims, demands, injuries (including death), or damages, including court
costs and attorney's fees and expenses, that may be sustained by me/my child while participating
in such activity, while traveling to and from the activity, or while on the premises owned or leased
by RELEASEES, including injuries sustained as a result of the sole, joint, or concurrent
negligence, negligence per se, statutory fault, or strict liability of RELEASEES.
understand this waiver does not apply to injuries caused by intentional or grossly negligent
conduct.
<ol><li>INDEMNITY CLAUSE. I am fully aware that there are inherent risks to my child,</li></ol>
myself and others involved with this activity, including but not limited to
, and I choose to voluntarily
participate/allow my child to in said activity with full knowledge that the activity may be hazardous
to me, my child and my property, and to the person and property of others. I acknowledge there
may be physically strenuous activities. I know of no medical reason why I/my child should not
participate. <i>I agree to indemnify and hold harmless INDEMNITEES</i> from any and all liabilities,
claims, demands, injuries (including death), or damages, including court costs and attorney's fees
and expenses, which may occur to myself, my child, other participants, and third-persons as a
result of my/my child's participation in said activity, including injuries sustained as a result of
the sole, joint, or concurrent negligence, negligence per se, statutory fault, or strict
<u>liability of INDEMNITEES.</u>

- 3. NO INSURANCE. I understand that RELEASEES may or may not maintain any insurance policy covering any circumstance arising from my/my child's participation in this activity or any event related to that participation. As such, I am aware that I should review my personal insurance coverage. Organization may not carry general liability insurance to cover claims arising from this activity so it seeks a waiver of claims as additional consideration for the right to participate so organization, can (a) provide the activity at the lowest possible cost to participants; and (b) provide access to a greater number of participants by expending limited resources on program materials rather than on liability insurance.
- 4. BINDS HEIRS. It is my express intent that this agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representatives, if I am deceased, and shall be governed by the laws of the State of Texas.
- 5. MEDICAL AUTHORIZATION, INDEMNITY FOR MEDICAL EXPENSES, and WAIVER. I understand RELEASEES cannot be expected to control all of the risks articulated in this form and RELEASEES may need to respond to accidents and potential emergency situations. Therefore, I hereby give my consent for any medical treatment that may be required, as determined by a medical professional at the medical facility, during my/my child's participation in this activity with the understanding that the cost of any such treatment will be my responsibility.

I agree to indemnify and hold harmless INDEMNITEES for any costs incurred to treat me/my child, even if an INDEMNITEE has signed hospital documentation promising to pay for the treatment due to my inability to sign the documentation. I further agree to release, waive, discharge, covenant not to sue, and agree to hold harmless for any and all purposes, RELEASEES from any and all liabilities, claims, demands, injuries (including death), or damages, including court costs and attorney's fees and expenses, that may be sustained by me/my child while receiving medical care or in deciding to seek medical care, including while traveling to and from a medical care facility, *including injuries sustained as a result of the sole, joint, or concurrent negligence, negligence per se, statutory fault, or strict liability of RELEASEES*. I understand this waiver does not apply to injuries caused by intentional or grossly negligent conduct.

6. VOLUNTARY SIGNATURE. In signing this agreement I acknowledge and represent that I have read it, understand it, and sign it voluntarily as my own free act and deed; sponsor has not made and I have not relied on any oral representations, statements, or inducements apart from the terms contained in this agreement. I execute this document for full, adequate and complete consideration fully intending to be bound by the same, now and in the future. I understand I can choose not to sign this document and free myself and my child from its terms and the associated risks of the activity by simply not participating in the activity and choosing some other activity available to me/my child that has a lower level of risk to myself and my child. I further understand this is a voluntary, extracurricular activity. While I understand alternative activities are available to me/my child that do not have the risks associated with this activity I still desire to voluntarily engage/permit my child to engage in this activity.

# SIGNING THIS DOCUMENT INVOLVES THE WAIVER OF VALUABLE LEGAL RIGHTS. CONSULT YOUR ATTORNEY BEFORE SIGNING THIS DOCUMENT.

day of

20

<b>Printed Na</b>	ne:	
	s Date of Birth:	
Parent or L (If Participa	egal Guardian Signature: nt is under 18 years old)	
Parent or L (If Participa	egal Guardian Printed Name:  nt is under 18 years old)	
In case of e	mergency, contact	
	mergency, contactving number	
at the follo	ving number	
at the follo	ipant has medical insurance, please indicate:	
at the follo	ving number	
at the following	ipant has medical insurance, please indicate:	
at the following in the particular insurance of Policy Num	ipant has medical insurance, please indicate:	

SIGNED this

## **HEALTH STATEMENT**

## **Southeast District 9 4-H**

Health screening performedFollow-up referred to:	Dietary	Camp Director	Dorm	Staff
Check one: Youth Adult	County	Camp		
The proposed activity provided by Southea their nature, physically demanding. Many of pulse rates. It is imperative that you are free free of medical or physical conditions which there is any doubt about your ability to safely	of the activities will ce of any heart related on might create undue r	hallenge you, and cause surges or other disease. Therefore, all j isks to themselves or any others	s in blood pressu participants mus s who depend on	are and t be them. If
Section I. Participant Information				
Name		Birth Age		
Address	Name of	Physician		
City, State, Zip	Physicia	n's Phone		
Home Phone	Date of l	last physical exam		
Section II. In the event of an Emergency,	nlease contact:			
Name		hone		
Address_				
City, State, Zip				
•				
Section III. Health History (Check the app				
Have you had or do you currently have any	heart problems (dates)	):	YES	NO
Do you frequently suffer from pains in your				NO
(NOTE: If you have any heart related pro				
Do you often feel faint or have spells of sev				NO
Has a doctor ever told you that you might ha				NO
Are you a smoker:			YES	NO
Do you have arthritis, joint, or back problen	ns that can be aggrava	ted by exercise:		NO
Have you had any operations or serious inju-	ries (dates):		YES	NO
Do you have any chronic recurring illness o	r communicable disea	ses:	YES	NO
Are there any activities to be limited/discou	raged by a physician's	advice:	YES	NO
Are you allergic to any medications, food or	food ingredients, inse	ects, or pollens:		_NO
Do you have Epilepsy:	_		YES	_NO
Do you have Diabetes:			YES	_NO
Do you have any prescribed meal plan or di				_NO
Are all immunizations up-to-date:			YES	_ NO
Date of last Tetanus shot		£.		
Any other health related information for Ce	nter personnel to be av	ware of:		
PLEASE NOTE: ALL medications r	nust be in <b>ORIGINA</b> l	L container with ORIGINAL	LABEL.	
Section IV: Medications (ALL medication	s must be in ORIGIN	AL container with ORIGINAL	LABEL)	
Are there prescribed medications currently l		scribe)	YES_	
Please check "over the counter" medications  Immodium Pepto Bisme Neosporin Benadryl	s which camp personned Ibuprofe Robituss		: nophen (Tylenol) eeded	
Signature of Participant:  (Or guardian if participant is under the age of	of 18)	Date:		
Signature	,	Date		



## **Schedule of Events**

Tuesday	June 27, 2017	Location
9:00 a.m.	Arrival, check-in to dorms	Atlantic Hall (Bldg # 3032)
11:00 a.m. 11:15 a.m.	General Assembly Candidate Meet & Greet	Atlantic Hall, foyer Atlantic Hall, foyer
12:00 p.m. 1:00 p.m.	Lunch Team Building Activity	Student Center
2:15 p.m.	Educational Session	Dorm Room Area Used (4 small)
3:30 p.m.	Team Building Activity	Dorm Room Area Used (4 small)/ Outside
4:00 p.m.	Educational Session	Dorm Room Area Used (4 small)
5:30 p.m.	Dinner	Student Center (Bldg # 3004) & dorms
7:00 p.m.	Candidate Speeches	TAMUG Dorms
8:00 p.m.	Dance	Atlantic Hall, foyer
10:00 p.m.	Closing Remarks & Reflection	Atlantic Hall, foyer
10:30 p.m.	In rooms	
11:30 p.m.	Lights out	



## **Schedule of Events**

Wednesday	June 28, 2017	Location
7:00 a.m.	Breakfast	Student Center
8:00 a.m.	Team Building Activity	Dorm Room Area Used (4 small)
9:15 a.m.	Educational Session (Table Etiquette)	Large Room
10:30 a.m.	Educational Session	Dorm Room Area Used (4 small)
12:00 p.m.	Lunch	Student Center
1:00 p.m.	Impromptu Speeches	Student Center
2:00 p.m.	Photo	Atlantic Hall
2:30 p.m.	Depart for Schlitterbahn	Schlitterbahn
5:00 p.m.	Dinner	Schlitterbahn
7:30 p.m.	Return to dorms	Atlantic Hall
8:00 p.m.	Dance	Atlantic Hall, foyer
10:00 p.m.	Closing Remarks & Reflection	Atlantic Hall, foyer
10:30 p.m.	In rooms	
11:30 p.m.	Lights out	

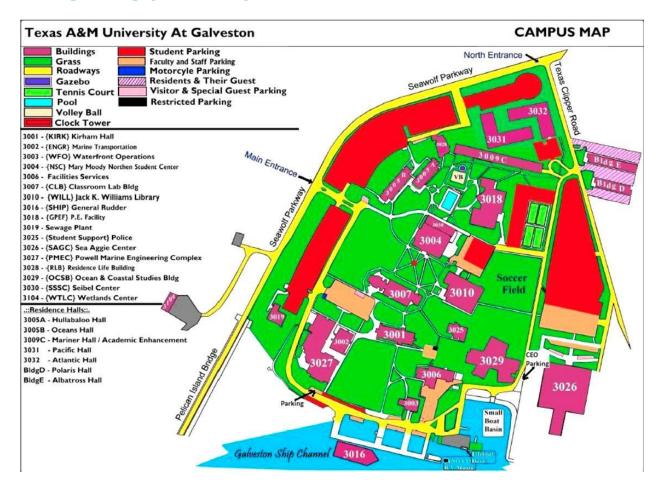


## **Schedule of Events**

Thursday	June 29, 2017	Location
7:00 a.m.	Breakfast	Student Center
8:00 a.m.	Educational Session	Dorm Room Area Used (4 small)
9:00 a.m.	Team Building Activity	Boat Building: TAMUG Pool
11:30 a.m.	Get ready for banquet	Atlantic Hall
1:00 p.m.	Depart for Banquet (Must have luggage packed from dorms. Will not come back.)	Atlantic Hall
1:30	Banquet (Elections during banquet)	Galveston County AgriLife Office
5:00 p.m.	DepartureSafe Travels Home!!!	Pick up will be at Galveston County AgriLife Office



## **Schedule of Events**

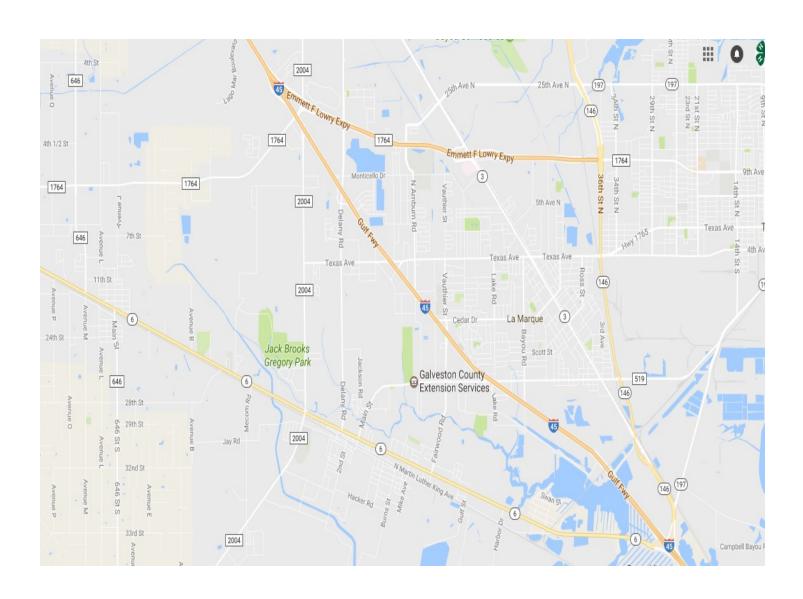




## **Schedule of Events**

(see map on last page for building names/numbers)

# Galveston County AgriLife Office





# District 9 4-H Leadership Lab Social Graces in 4-H Places

Date: June 27th thru June 29th, 2017

Location: TAMU Galveston Campus

Registration: Due May 28, 2017 on 4-H Connect Cost: \$255 includes lodging and meals

Age: Participants must have completed 8th grade.

Graduating Seniors are eligible to attend.



Leadership Lab is designed to prepare District 9 4-H members for various leadership roles at the county, district, and state level. Participants gain valuable knowledge and skills they can take home and implement in their local county 4-H program. By combining work and play, activities are designed to explore creativity in leadership roles, enhance teambuilding skills, and develop communication and public speaking skills.

### 2017 Lab Activities:

- Schilterbahn Adventure
- Resume Building Workshop
- Ettiquette Banquet
- Soldier Item Collection Community Service
- Interviewing Skills
- Dance

Additional Info Available at: <u>District 9 4-H website</u>

# District 9 4-H Council Elections

Officer campaigns, speeches, and elections will be integrated into Leadership Lab activities.



# DISTRICT 9 SOLDIER ITEM COLLECTION

**Chewing Gum** Combs Gatorade Powder Hair Ties Nuts Oatmeal Soup Packets Spam Sunflower Seeds Tea Twizzlers Candy Batteries – all sizes **Bibles Books** Cards Crossword books Dice **Dominos Duct Tape** 



Fly Strips **Hand Towels Knife Sharpeners** Magazines Pens/Pencils **Tissues Travel Games T-Shirts** Ziploc Bags Baby Powder **Bug Spray** Eye drops Female Items Hair Brushes Nail Clippers Nail Files Powder – Body/ Foot Q-Tips





Please bring items to the 2017 District Leadership Lab