

The Michigan 4-H Foundation
Leadership Training Center



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**MICHIGAN STATE UNIVERSITY EXTENSION
4-H BEEF, SHEEP AND SWINE TEEN AND ADULT VOLUNTEER LEADERS WORKSHOP
February 25 – 26, 2012**

PLACE:

Kettunen Center, Tustin, Michigan

TIME:

Start Time: Saturday, February 25, 2012, 4 to 6 p.m.

Adjourn: Sunday, February 26, 2012, 3:00 p.m.

WORKSHOP COORDINATOR:

Kenneth Geuns

COST:

The fee for 4-H members and 4-H volunteers to attend this 2-day workshop is \$51.25. MSU Extension staff, including educators (agents), program associates and assistants, who bring a volunteer leader to the workshop, will also be charged the reduced volunteer rate of \$51.25. The remainder of their expenses will be covered by donations to the Michigan 4-H Foundation. This fee includes \$33.25 toward meals and lodging and an \$18.00 resource fee, which covers the average cost to the State 4-H office for educational materials, resource people, supplies for volunteer training workshops, and support for the Michigan 4-H veterinary science program.

The fee for all MSU Extension staff, including agents, program associates, assistants who do not bring a leader is \$75.50. The fee for personnel from other agencies is also \$75.50 which includes meals, lodging and the \$18.00 resource fee. All fees must be prepaid at your local county MSU Extension office. Persons canceling without a replacement, after February 16, will be charged the \$18.00 resource fee. Anyone (including resource people and staff) who does not cancel in writing to ellerg@msu.edu 48 hours, February 22nd, before the workshop will be billed a \$51.25 "no-show" fee.

RESERVATIONS:

Reservations should be received in the county MSU Extension office by February 10. This deadline will be strictly enforced, which means registrations received after this date will not be accepted. Reservations are made on a first-come, first-served basis. Please use workshop #908 when registering on the MSUE 4-H Workshop Registration System. You do not need to pre-register for individual sessions.

WHO SHOULD ATTEND:

Older youth (13 years by January 1, 2012), teen leaders and adult leaders interested in furthering the success of local and county livestock programs and all Extension staff. This workshop is designed to benefit persons already experienced in the program, as well as, those who contemplate establishing programs. Participants are expected to attend sessions, encouraged to ask questions, and to share the

information with others in your home county. In addition, participants are expected to take the information that they have gained at this workshop and share it with others in their local county and club programs.

CONFERENCE OBJECTIVES:

- Teach skills in areas of practical livestock production and management
- Develop communication skills and leadership techniques for participants in order to more effectively re-teach skills in the county
- Offer an opportunity to share with others, programs that have been successful in other counties
- Develop methods to encourage youth and their families to participate in 4-H clubs and other Extension activities.

CHAPERONE RESPONSIBILITIES:

Every county is responsible for designation of chaperones for youth coming to state off-campus 4-H events. Chaperones must be adults (aged 21 years old or older) who have gone through the MSU Extension Volunteer Selection Process. Chaperones are responsible for serving as role models for youth and for guiding youth behavior. All adults serving as chaperones during 4-H events should receive information about their chaperone role before the event. This could take place at a face-to-face meeting, over the phone or via mail. This offers an opportunity for chaperones to review the role of and expectations for event chaperones and to raise any questions or concerns they might have. A “4-H Event Chaperone Responsibilities” handout is available at the “Staff Resources for the Youth-Adult Housing Policy” web page: http://4h.msue.msu.edu/4h/resources/4h_housing_policy.

YOUTH-ADULT HOUSING POLICY FOR 4-H OVERNIGHT EVENTS:

To help ensure the safety and well-being of both youth and adults involved with Michigan 4-H, the “Youth-Adult Housing Policy for 4-H Overnight Events” was developed. This mandatory policy, which went into effect on January 1, 2008, applies to any Michigan 4-H–sponsored state-, regional-, multi-county-, county- or club-level overnight event where adults are housed with youth, such as workshops, events, fairs, exchanges, overnight trips, lock-ins and camps. The core of the policy states that youth can be housed with unrelated adult chaperones aged 21 and over (age as of date of event) at overnight 4-H events as long as the youth-adult ratio is at least two youth to one adult and the adults have been through the MSU Extension Volunteer Selection Process. Before any youth attends an overnight 4-H event, each youth’s parent or legal guardian must sign and return the 4-H Overnight Housing Parent/Guardian Permission Form (available from the county MSU Extension office). This form is kept on file at the county MSU Extension office and it is not sent to the State 4-H Office. Complete information on the policy is available at: http://4h.msue.msu.edu/4h/resources/4h_housing_policy.

REGISTERING YOUTH AGED 18, 19 OR 20:

In keeping with the *Michigan 4-H Youth-Adult Policy for 4-H Overnight Events*, any youth aged 18, 19 or 20 at the time of the event who is a registered 4-H member and who attends an event as a participant must not be housed with or share bathrooms with younger, unrelated youth unless he or she has completed a background check including one reference check and a criminal history check. The background check should be completed no more than once a year, unless circumstances warrant more frequent checks. When county staff registers a 4-H member 18, 19 or 20 years old on the MSU Extension 4-H Workshop Registration System, they will be asked if a background check has been completed for youth in this age bracket. The State 4-H Office will accept and process registrations only if

a background check is completed. This form is kept in the county, and it is not sent to the State 4-H Office. Complete information on the policy is available at:
http://4h.msue.msu.edu/4h/resources/4h_housing_policy.

MEDIA RELEASE/MEDICAL TREATMENT AUTHORIZATION:

When registering a youth participant aged 18 and under for a workshop, **the participant's parents or guardians must complete and sign the Medical Treatment Authorization section of the form.** This form is then given to the county MSU Extension office, forwarded to the 4-H State office who in turn gives it to the workshop coordinator just before the event. Copies of the form can also be brought to the workshop. Youth without a form signed by a parent or legal guardian will not be allowed to stay at this overnight workshop.

All workshop participants, teen and adult, are encouraged to complete the Media Release section of the form. This section authorizes MSU Extension to record and photograph workshop participants and to use these photos and voice recordings in educational and promotional publications and programs.

WHAT TO BRING:

Counties are encouraged to bring a display on their livestock program. It should highlight activities, educational materials and/or ideas. Hand-outs are strongly encouraged. Bring casual clothes suitable for indoor and outdoor relaxation. Bedding and linens are provided.

SPONSORS:

This workshop is sponsored by the Michigan 4-H Foundation through a grant provided by the sources listed below:

*Michigan Pork Producers Association
Attn: Ms. Mary Kelpinski, Executive Director
3515 West Road, Suite B
East Lansing, MI 48824*

Support for the science literacy focus offered during the 2011-2012 4-H workshop season is provided by a grant to the Michigan 4-H Foundation from the **Rollin M. Gerstacker Foundation**

*Rollin M. Gerstacker Foundation
Attn: Mr. E. N. Brandt, Vice President
P. O. Box 1945
Midland, MI 48641-1945*

All participants are strongly encouraged to send a letter of appreciation to the above donor. Without their help this workshop would not have been possible.

SMOKING REGULATIONS:

All persons are expected to follow Kettunen Center's smoking regulations. The use of tobacco is prohibited in all indoor spaces. Smoking areas are provided outside of the buildings. Youth participants are not allowed to use tobacco in any form.

CONDUCT POLICY:

Positive behavior is a key expectation for youth and adults participating in 4-H activities – behavior that reflects trustworthiness, respect, responsibility, fairness, caring and citizenship. Participants are

expected to follow all workshop and event guidelines. Theft, vandalism, the use of illegal drugs and alcohol, inappropriate or threatening behavior that violates the rights of others, and other such offenses are strictly prohibited, and anyone involved with these offenses will immediately be sent home at his or her own expense. If it is determined by 4-H staff or persons in charge of the activity that the offense warrants it, the offender will be turned over to the proper authorities. Participants are expected to take responsibility for their own actions and encouraged to inform their chaperones or the workshop coordinator if another person is mistreating them.

ACCOMMODATIONS FOR PERSONS WITH DISABILITIES:

Accommodations may be requested by calling Ken Geuns at (517) 353-2924 three weeks before the workshop to ensure sufficient time to make arrangements. Requests received after this time will be met when possible.

2012 4-H Beef, Sheep and Swine Teen and Adult Leaders Workshop

***(Please Note: This is a tentative program schedule.
Topics may change depending on speaker availability.)***

Saturday, February 25

4:00 - 6:00 pm	Workshop Registration
5:15 - 5:45 pm	Meeting for Chaperones and Adults <i>Ford Room</i>
6:00 - 7:00 pm	DINNER
7:00 - 7:30 pm	Introductions and Get-Acquainted <i>Lakeview Room</i>
7:30 - 8:45 pm	4-H - Preparing Youth for Life: In 4-H, we say that the child is the project and the project is the vehicle to teach the skills! Learn how you can translate your 4-H experience into usable skills for their future. <i>Lakeview Room</i>
8:45 - 9:00 pm	BREAK
9:00 - 10:00 pm	Livestock Quiz Bowl (with a new twist) <i>Lakeview Room</i>
10:00 - 11:00 pm	Free Time
11:00 pm	TO BED, LIGHTS OUT and QUIET

Sunday, February 26

7:30 - 8:15 am	BREAKFAST
8:15 - 9:45 am	County Exchange: How Do You make Your Club Meetings Fun and Maybe Learn Something <i>Lakeview Room</i>
10:00 - 10:50 am	Choose One of the Following: <ol style="list-style-type: none">1. Pork Quality Assurance Certification for Youth2. Conducting and Managing for Livestock Show (Adults Only)

3. Ideas for Successful Club Meetings
4. Telling the Straight Truth: Learn how to be an effective advocate and spokesperson for agriculture
5. How Can I Get Involved in the State 4-H Awards Program

11:00 - 11:50 am

Choose One of the Following:

6. What Are All of These Feed Additives for Livestock Diets
7. Meats Judging and Evaluation
8. Raising a Safe and Wholesome Food Supply
9. Preparing for a Speech or Demonstration: Developing communication skills
10. What Do Our Livestock Commodity Organizations Do For Us?

12:00 - 1:00 pm

LUNCH

1:00 - 1:50 pm

Choose One of the Following:
Repeat Sessions: 1, 2, 3, 4, 5

2:00 - 2:50 pm

Choose One of the Following:
Repeat Sessions: 6, 7, 8, 9, 10

3:00 - 3:15 pm

Wrap-up: Evaluations, Thank You Notes, Adjourn

**MSU EXTENSION - OAKLAND COUNTY
4-H YOUTH DEVELOPMENT
Workshop Registration Form**



Registration will be on a first-come, first-served basis, so register as soon as possible to assure your space at the workshop. Complete this form, the Media Release/Medical Treatment Authorization, and parent must complete the Overnight Housing Permission Form. Feel free to copy any of these forms as needed. **Return all forms, with payment, to MSU Extension - Oakland County, 4-H Youth Development, 1200 N. Telegraph Rd. - Dept. 416, Pontiac, MI 48341-0416. Please make your check payable to MSU Extension.** Phone: 248-858-0889 Fax: 248-858-1477.

Youth must have adult chaperones of the same gender. The ratio is one adult to five youths of the same gender for youth aged 13 and older and one to three for youth aged 12 and under.

Name: _____ Phone: _____

Address: _____ County: OAKLAND

City: _____ Zip Code: _____

Email Address _____

Birth Date (if 18 or under): _____ Age: _____ Gender: Male Female

If you are **18-20 years** old at the time of the event, complete the **Background Check Form** and return with other forms.

Status (check one): Member Volunteer Chaperone Staff Other (please specify) _____

If member, list your chaperones name (if known): _____

If chaperone, list the names of the youth you will chaperone (if known): _____

Chaperones: Please confirm you have gone through the Volunteer Selection Process (required). Yes or Pending – will be completed before event _____.

Do you have a disability or special needs? Yes No If yes, please list _____

Accommodations for persons with disabilities may be requested by calling the State 4-H Office at (517) 432-7575 three weeks before the workshop to ensure sufficient time to make arrangements. Requests received after this time will be met when possible.

Racial-Ethnic Category: (for affirmative action purposes only). If of Hispanic Ethnicity check here _____

White (only) African American/Black (only) Asian (only) Native Hawaiian/Other Pacific Islander (only)

White & Black White & American Indian or Alaskan Native Black & American Indian or Alaskan Native

White & Asian Arabic or Other (please specify) _____

Workshop Title: _____

Place of Event: _____ Dates of Event: _____

Option Choices If Requested: _____

Attending Entire Conference? Yes No (If no, please enter arrival and departure dates and times below.)

Arrival: _____ Departure: _____ Need Lodging? Yes No

Are you interested in car pooling? Yes No If yes, list your phone number: _____

Special requests: (roommate, dietary needs, etc.) _____

Costs: 4-H members and volunteers _____ Date received (Oakland County Office) _____

Non 4-H members and volunteers: _____ Receipt Number _____

Total Due: _____ Reservations sent to State Office _____

Any cancellations must be made at least 48 hours prior to the start of the conference. Otherwise the money already paid will be forfeited.

Receipt & confirmation e-mailed or sent to participant _____

Cancellation _____

The remainder of the fee has been generously donated by sponsors to the Michigan 4-H Foundation to help support 4-H Members and Leaders across the state.

MSU is an affirmative-action, equal-opportunity employer. Michigan State University Extension programs and materials are open to all without regard to race, color, national origin, gender, gender identity, religion, age, height, weight, disability, political beliefs, sexual orientation, marital status, family status or veteran status.

MEDIA RELEASE/MEDICAL TREATMENT AUTHORIZATION

Event: _____
Date: _____
County: _____

SECTION 1 – RELEASE FOR AUDIO, VIDEO, FILM AND PHOTOGRAPHS

Participants in events sponsored by MSU 4-H are sometimes photographed and videotaped for use in MSU 4-H promotional and educational materials.

I authorize Michigan State University to record the image and voice of the subject named below and give MSU and all persons or entities acting pursuant to MSU's permission or authority, all rights to use of these recorded images and voice. I understand that said images and/or voice will be used for educational, advertising and promotional purposes in all conventional and electronic media, including but not limited to the Internet, and any future media. I also authorize the use of any printed material in connection therewith.

I understand and agree that these images and recordings may be duplicated, distributed, with or without charge, and/or altered in any form or manner without future or further compensation or liability, in perpetuity.

Print subject's name (adult or youth) _____

Signature _____

(Parent or guardian must sign here if subject is under age 18.)

Date _____

SECTION 2 – MEDICAL TREATMENT AUTHORIZATION

This section must be completed and signed by a parent or guardian for all youth participants before they can participate in this program. If this form is not completed, youth participants will not be allowed to participate. Completing this section is optional but encouraged for adult participants.

Please complete this form to give a medical facility permission to treat the participant for minor injuries or medical problems. In the event of serious injury or illness, the parent or person designated will be contacted. Treatment will proceed before contacting the parent or person designated **only if the situation is urgent and does not permit delay.**

Participant's full name _____

Birth date _____ Phone (_____) _____

Mailing address _____

Primary care physician's name _____

Physician's address _____

Physician's phone (_____) _____

HEALTH INSURANCE INFORMATION:

Policy holder's name and relationship to participant _____

Policy holder's address _____

Please attach a photocopy of both sides of your insurance card (preferred) OR complete the information requested here:

Insurance company name and address _____

Insurance company phone number (_____) _____

All policy numbers (please identify) _____

If you have HMO insurance, please list emergency treatment authorization phone number (_____) _____

Employer's name and address _____

INFORMATION NEEDED ABOUT PARTICIPANT:

Please check yes or no. If yes, explain below or on another sheet if you need more room.

Yes No

Does the participant have any chronic health problem or illness? _____

Does he or she have any acute illness now? _____

Has the person been treated recently for some medical problem? _____

List any medications he or she is now taking for treatment of any medical problem. _____

Does the participant have any allergies to medication or local anesthetics? _____

Does he or she have any allergies? _____

Date of his or her last tetanus shot: _____

OFFICIAL AUTHORIZATION FOLLOWS:

I (parent or legal guardian), _____ recognize that while attending this program, medical treatment on an emergency basis may be necessary for my child, and I further recognize that MSU 4-H staff may be unable to contact me for my consent for emergency medical care. I do hereby consent in advance to such emergency care, including hospital care, as may be deemed necessary under the circumstances and to assume the expenses of such care. I also authorize the medical facility to release any and all information required to complete insurance claims and also authorize insurance payment directly to the medical facility.

Signature _____

(Parent or guardian must sign here if participant is under age 18.)

Date _____

Mailing address _____

Daytime phone (_____) _____

Evening phone (_____) _____

This form is to be filled out by a parent/guardian of **ANY** youth attending an MSU Extension 4-H overnight event

4-H Overnight Housing Parent/Guardian Permission Form

Parent/Guardian: Please complete the following information and return the top portion of this sheet to:

*MSU Extension Oakland County
4-H Youth Development
North Office Bldg. – Bldg. 26E
1200 N. Telegraph Rd.
Pontiac, Michigan 48341*

Keep the information at the bottom of this form for your records.

I understand that my child _____ will be attending
(name of child)

_____ on _____
(name of event) (date of event)

at _____ and that he or she may be sharing lodging
(location of event)

with an unrelated adult (21 or older) who has been through the Michigan State University Extension Child Well-Being Volunteer Selection Process* and with at least one other youth. By signing this form I give my permission for my child to attend this event under these lodging conditions. I also understand the Michigan 4-H Code of Conduct** expectations for adults and youth attending this event.

Signature of Parent/Guardian

Date



Parent/Guardian: Keep this information for your records:

Name of event: _____

Date of event: _____ Location of event: _____

In case of an emergency requiring you to contact your child during the event, contact:

*For more information on the **Michigan State University Extension Volunteer Selection Process**, contact our 4-H office or go to <http://web1.msue.msu.edu/msue/cyf/youth/cwbvsp.html>

****Michigan 4-H Code of Conduct for 4-H Activities:** Positive behavior is a key expectation for youth and adults participating in 4-H activities – behavior that reflects trustworthiness, respect, responsibility, fairness, caring and citizenship. Participants are expected to follow all workshop and event guidelines. Theft, vandalism, the use of illegal drugs and alcohol, inappropriate or threatening behavior that violates the rights of others, and other such offenses are strictly prohibited, and anyone involved with these offenses will immediately be sent home at his or her own expense. If it is determined by 4-H staff or persons in charge of the activity that the offense warrants it, the offender will be turned over to the proper authorities.

