New York State Fair Youth Dairy Cattle Show
Youth Expectation of Conduct Form/Photo Release

(Be sure one of these forms, after reading and signing, is stapled to your youth entry form.)

This form applies to all youth attending the NYS Fair Youth Dairy Cattle Show. The youth and parent/guardian, by signing this form, agree to conduct him/her in a responsible manner and abide by all expectations as stated.

Youth responsibilities:

1. Attend and participate in program orientation; prepare for the program in advance.
2. Be on time and participate in all scheduled sessions including workshops, recreation, evening activities and meetings.
3. Cooperate with the adult advisors' and program staff's leadership. Contact the adult advisor in regard to any conflict or problems during the event.
4. Show respect and courtesy for the entire program.
5. Be respectful of public property and the facilities used during the activity or event. Be responsible for your own property.
6. Behave in accordance with applicable federal, state and municipal laws.
7. Behave in ways that are acceptable to other exhibitors, adult advisors and hosting organizations and uphold high standards for the group by respecting the ideas, abilities and bodies of others. Use of language and gestures found to be objectionable to others is not permitted.
8. Remain on the premises or assigned program area throughout the program; unauthorized absence is not permitted.
9. Use good judgment in selecting clothing appropriate for weather and occasion, abiding by any established dress code. Clothing that is revealing or with obscene language/pictures or with drug, tobacco or alcohol advertising is never allowed.
10. Abide by the lodging assignments for the entire event for easy location in an emergency. No room/bed switching is allowed.
11. Abide by established written curfew and quiet times or by adult advisor's spoken word. (Curfew means being in the assigned room/bed with the lights out.) Be quiet and considerate of others when they wish to sleep.
12. Respect the privacy of others. Visiting sleeping areas of any member of the opposite sex is forbidden.
13. Youth are encouraged to interact with all members of the group and not pair up with another person. Necking, kissing and other displays of personal affection are in poor taste and will not be tolerated. Refrain from all sexual activity during the program.
14. Possession and/or use of alcohol, tobacco, fireworks, weapons, illicit drugs or medication(s) unapproved by program staff will result in disciplinary action for the offender(s). Adult advisors may be informed of all prescription medications present during the program.

Consequences of disciplinary action:

1. Families of participants removed from the program will be responsible for the participants' animal(s) transportation, including bus/plane fares and supplemental "Unaccompained Child' fares or expenses for a chaperon. Event registration, lodging or other participant fees will not be reimbursed.
2. If damage/destruction of property occurred, participants will be assessed for the cost of damages and repairs.
3. Participants removed from the program may be required to relinquish all funds donated to help meet his/her financial obligations for the event.
4. Youth who do not follow the guidelines in this Expectation Agreement while participating in a 4-H or youth event may be required to appear before a county Disciplinary Review Committee in addition to consequences that occur during the event.
5. Disciplinary action may result in restricted opportunity to participate in future youth or 4-H related activities for the involved members.
6. Youth who break public laws will be dismissed from the program and will be subject to legal action by law enforcement authorities.
7. Youth exhibitors caught drinking will have premium(s) pulled, will be sent home immediately and will not be allowed to exhibit in the NYS Fair Youth Dairy Show the following year.
I have read and understand this Expectation Agreement and will abide by it.

_____________________________________________________                ____________
Youth Participant’s Signature                                                            Date

I have read and understand the rules and penalties in this agreement and agree to be bound by them.

_________________________________________________________              ____________
Parent/Guardian’s Signature                                                                 Date

Address and telephone where parent or guardian can be reached during this program.
Name: _______________________________________________________________________
Address: ___________________________________________________________________
Daytime phone: ____________________________    Night phone: ___________________________
      (Area code)                                                                 (Area code)

PHOTO RELEASE:
Cornell Cooperative Extension and Cornell University are granted permission to use and/or publish my or my child’s photograph or image (including: audio, film, digital image or any other media) for educational purposes on their respective websites or for the promotion of their respective programs. I understand that I/my child/ward are not being compensated in any way for the use of our images and that I/we do not have approval over the final product in which it appears. I hereby release Cornell Cooperative Extension, the Cornell Cooperative Extension Associations, and Cornell University and all persons acting under their permission or authority from any and all claims or liability arising out of use of our images. This release shall bind our heirs, guardians, assigns, and legal representatives.

If this release is being signed for a child/ward, I certify that I am the parent/guardian authorized to sign this release. I understand the program policies and agree to follow the policies outlined above.

Participant
Signature_______________________________________________________          Date__________________________

Parent or Guardian’s Signature_____________________________________________    Date__________________________