

4-H News



Fall/Winter Newsletter, 2024

Cooperative Extension Service

Montgomery County
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Hello, 4-H Families:

IMPORTANT Deadline Reminder:



September 1 began a new 4-H program year. Membership in 4-H begins with completing the 4-H Participation Information Enrollment form which is also known as the "4-H PIE" form.

What is 4-H? 4-H is the dynamic, informal educational youth program of the Cooperative Extension Service that combines the cooperative efforts of youth, volunteer leaders, the University of Kentucky, Kentucky State University and local and federal governments.

In Montgomery County, **the following project clubs are offered Livestock, Horse, Shooting Sports, and Junior Chef/Culinary. To be an official member of any of our 4-H clubs, the 4-H PIE form must be completed and turned in by December 1st.** You can still register for the 4-H Newsletter and individual study projects after December 1st but certified clubs will not accept members after December 1st.

Livestock, Horse and Shooting Sports are certified projects in Kentucky 4-H which means that a required minimal amount of education hours must be completed before a member can compete in the events and contests offered through these projects. In the Livestock and Horse projects, a minimum of 6 hours of education must be completed prior to June 1, 2025. Now is the time to begin earning the education hours.

Whether you are a new member or a returning member, the 4-H PIE Form for 2024-25 must be completed this year. For more information about joining 4-H, you can contact me at the Montgomery County Extension Service office at 859-498-8741 or by email at ccomer@uky.edu. Call me on my cell phone at 859-404-3684 for questions about joining 4-H.

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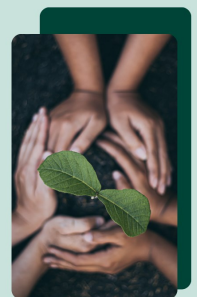
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Cooperative Extension Service

KENTUCKY 4-H Cultivating Future Farmers

Kentucky 4-H Agriculture and Animal Science programs offer hands-on learning experiences that empower young people to become future leaders in agriculture. Through a variety of exciting activities, including livestock shows, gardening clubs, and field days, youth develop critical skills like responsibility, teamwork, and problem-solving.



Ready to dive into the world of agriculture?
Join Kentucky 4-H by contacting your local county extension office!

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Extension Service

Agriculture and Natural Resources
Family and Consumer Sciences
4-H Youth Development
Community and Economic Development

MARTIN-GATTON COLLEGE OF AGRICULTURE, FOOD AND ENVIRONMENT

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Disabilities
accommodated
with prior notification.

4-H Participant Information/Enrollment Form

Should this information change during the program year, it is the responsibility of the parent/guardian(s) to notify the Extension Personnel in writing.

I. Re-Enrollment

If re-enrolling, please complete section I. Re-Enrollment, then review sections II through IX and verify review by signing and dating.

Name:		School Name:		County:	
Grade:					

II. Family Information

This is the primary information we will use to communicate with your 4-H member.

Family Name:		Family Email:	
Family Phone:		Family Address:	

III. Member Information

First Name:		Last Name:	
Preferred Name (optional):		Birthdate:	
Sex:	<input type="checkbox"/> M <input type="checkbox"/> F	Residence:	<input type="checkbox"/> Farm <input type="checkbox"/> Town <10,000 or Rural Non-Farm <input type="checkbox"/> Town/City/Suburb 10,000-50,000 <input type="checkbox"/> City/Suburb >50,000 <input type="checkbox"/> City-Central >50,000
Hispanic/Latino:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Race:	<input type="checkbox"/> American Indian <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Prefer not to say <input type="checkbox"/> Not Listed:

IV. Parent/Guardian 1 Information

Last Name:		First Name:	
Phone:		May we release personal information to this person?	<input type="checkbox"/> Yes <input type="checkbox"/> No

V. Parent/Guardian 2 Information

Last Name:		First Name:	
Phone:		May we release personal information to this person?	<input type="checkbox"/> Yes <input type="checkbox"/> No

VI. Other Emergency Contact

Name:		Relationship:	
Phone:		May we release personal information to this person?	<input type="checkbox"/> Yes <input type="checkbox"/> No

VII. Pick Up Information

In addition to the parent/guardian(s) and emergency contacts listed, please list the names of up to two additional people authorized to pick up the above referenced child. These individuals will not be contacted in case of an emergency, the parent/guardian(s) or emergency contact information will only be used. If an individual who is not listed on this form is permitted to pick up your child/children, the parent/guardian(s) will need to provide written permission (letter or email) to Extension personnel or approved volunteer responsible for the event/activity.

Name of First Person:		Relationship to 4-H Member:	
Phone:			
Name of Second Person:		Relationship to 4-H Member:	
Phone:			

VIII. Military Service (if none, skip this section)

Relationship to Member serving:		Branch of service	
Service Status:	<input type="checkbox"/> Active Duty <input type="checkbox"/> National Guard <input type="checkbox"/> Reserves <input type="checkbox"/> Other:		



IX. Health History

Does the participant have, or at any time has had, any of the following? Check "Yes" or "No" to each item. Please explain any "Yes" answers (noting the number of the item) in the space below or on an additional sheet if necessary. Reporting conditions allow Extension personnel and approved volunteers to best support your young person and will be kept confidential.

Allergies

1.Serious Allergy to Insects	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.Serious Allergy to Dairy	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.Serious Allergy to Gluten	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.Serious Allergy to Nuts	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.Other Allergy(Please explain)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please explain any "yes" responses, including medications for any allergies:

The following over the counter medications may be administered to my child without contacting me:

Acetaminophen:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Antacid:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Antihistamine Pill:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Decongestant:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Dramamine:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hydrocortisone Cream:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ibuprofen (Advil)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Polysporin (topical antibiotic)	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Conditions

1.Asthma	<input type="checkbox"/> Yes <input type="checkbox"/> No	6.Fainting	<input type="checkbox"/> Yes <input type="checkbox"/> No	11.Wear Glasses/Contacts?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.Bronchitis	<input type="checkbox"/> Yes <input type="checkbox"/> No	7.Headaches	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please explain any "yes" responses, including medications taken for any conditions:	
3.Convulsions	<input type="checkbox"/> Yes <input type="checkbox"/> No	8.Heart Condition	<input type="checkbox"/> Yes <input type="checkbox"/> No		
4.Diabetes	<input type="checkbox"/> Yes <input type="checkbox"/> No	9.Hypoglycemia	<input type="checkbox"/> Yes <input type="checkbox"/> No		
5.Ear Infection	<input type="checkbox"/> Yes <input type="checkbox"/> No	10.Other Conditions	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Please explain any restrictions (dietary, physical, etc)

Social, emotional, and/or behavioral health information:

X. REVIEW CONFIRMATION SIGNATURE

All information provided on this form is correct and complete to the best of my knowledge. This person has permission to engage in all events and activities. I hereby give permission to the event designee to provide routine health care, administer prescription and over the counter medications as noted and seek emergency medical treatment if warranted. I agree to the release of all records necessary for medical treatment, billing, or insurance. In the event I cannot be reached in an emergency, I give permission to the attending physician to secure and administer treatment, including hospitalization.

PARENT/GUARDIAN: _____ DATE: _____

XI. SURVEY & EVALUATION RELEASE

I hereby establish my willingness to participate as an adult (i.e., 4-H leader, other volunteer, parent/ guardian, site manager, etc.) and give permission for my child (under 18 years of age) to complete surveys and evaluations that will be used to determine program effectiveness or to promote the program. I understand that participation in surveys and evaluations is voluntary and that my child and I may choose not to participate and may withdraw from surveys and evaluations without impact on my or my child's eligibility to participate in the 4-H program. I understand that my child or I may be asked for consent before completing a survey or an evaluation.

Yes No I am willing to participate or give permission for my child to participate in any program evaluation. (Initials)

XII. PERMISSION TO PARTICIPATE

I acknowledge that my child is participating in 4-H programs for their own personal benefit and that my child will participate in recreational and other activities as part of 4-H programs. I understand that some activities may have inherent dangers and physical risks and that no amount of care, caution, instruction, or expertise can completely eliminate them. I assume responsibility for all risks, known and unknown, involving my child's participation in 4-H programs and I voluntarily authorize my child's participation in reliance upon my own judgment and knowledge of my child's experience and capabilities. I hereby agree to indemnify and hold harmless the University of Kentucky Cooperative Extension Service and all related parties from any liability, losses, costs, damages, claims or causes of action of any kind or nature arising from or related in any way to my child's participation in 4-H program. (Initials)

XII. PUBLICITY RELEASE

I hereby grant the 4-H program, University of Kentucky and their agents, the right to use, reproduce, assign, and/or distribute still pictures, video, and sound recordings of myself or my minor child without compensation for use in promotion, advertising, educational publications or online content

PARENT/GUARDIAN _____ NO, I DO NOT PERMIT

4-H Youth Development Code of Conduct Form

All 4-H members and family/friends/caretakers associated with 4-H members must respect the individual rights, safety and property of others and adhere to this Code of Conduct. A 4-H member may be prohibited from participating in a specific event/program if the participation by the individual poses a danger to the 4-H member and/or others. Safety of all involved in 4-H programs is top priority, the following guidelines are designed to ensure all involved understand their role in participating in a safe and educational environment for all.

WHILE ENROLLED AS A 4-H MEMBER:

- To be a member in good standing it is expected that the 4-H participant attends planned sessions, workshops, field trips, and meetings associated with their enrollment. To be eligible for cumulative events in 4-H, members must complete at least six hours of education in the core program area they are participating in under the expectations laid out by the 4-H program.
- Dress codes will be specific to individual events/programs/activities.
- The possession and use of alcoholic beverages, tobacco products, vape juice and/or devices, and/or drugs (except for medications prescribed to the participant by a licensed physician, with proper paperwork and accommodations made) are prohibited.
- Possession of firearms not for educational use is prohibited.
- Setting of fire alarms and tampering with fire extinguishing and other emergency equipment are prohibited.
- Gambling of any type is prohibited.
- Respect toward others and facilities shall be demonstrated. Bullying, harassment of others or destruction of property shall not be tolerated. Bullying and harassment can include the use of social media.
- Physical violence is not tolerated.
- Obscene, discriminatory and/or inappropriate language, roughhousing, and insubordination are prohibited at all times.
- Display of overly affectionate or inappropriate attention between participants is prohibited.
- Technological equipment (including but not limited to cell phones, laptops, or mp3 players) shall not interfere with the program and may not be allowed in certain situations.
- Articles of clothing which display profanity, products, or slogans which promote tobacco, alcohol, drugs, sex, or are in any other way distracting, are prohibited.
- Additional expectations may be required based on the activity/program/event the 4-H member is participating in.

WHILE ATTENDING OVERNIGHT 4-H EXPERIENCES THE FOLLOWING WILL ALSO APPLY:

- All participants must follow the agenda and expectations that are set forth by the program planners. Chaperones/adult volunteers will actively monitor all participants.
- All participants are to be in their assigned area at curfew and comply with quiet hours, lights out, and other rules of the event. Chaperones/adult volunteers will actively monitor all participants.
- No member or volunteer may leave the event/activity/program without the permission of the event planner or adult in charge. An adult shall accompany a 4-H member at any time they leave the grounds. Adults shall notify another adult before leaving the grounds.
- At overnight events, only conference participants may be in sleeping areas. Individuals may only be in their assigned sleeping area. Lounges or common areas may be used only for working committees and social activities.

Any violations of this Code of Conduct shall be reported promptly to the chaperone for the individual and to the person in charge of the event. The person in charge of the event shall have the final responsibility for disciplinary action. Failure to comply with the Code of Conduct by 4-Hers and family/friends/caretakers associated with the 4-H participant may result in penalty including, but not limited to, the following:

- Sent home from the activity or event at their own expense.
- Barred from participation from future 4-H events.
- Assessed the cost of damages for destruction of property.

I, _____, have read the Code of Conduct and agree to abide by its rules.
(Print Name)

I understand that infraction of this Code of Conduct will result in any or all of the penalties listed above.

Member: _____ County: _____

Parent/Guardian: _____ Date: _____



4-H TEEN CLUB NEWS:



The Montgomery County 4-H Teen Club met on October 15, 2024 for their monthly meeting. The 4-H Teen Club met at Dairy Queen to present Mr. Greg Waters an Appreciation Award named after Mr. Calvin Hunt Sr. The award “Calvin Hunt Award” was given in recognition of his support to Montgomery County Youth and the 4-H Program. Mr. Waters shared this story with the group on how he became involved with Dairy Queen. What an interesting journey he had. Mr. Waters also provided dinner for each student as well as let them make their own blizzards.

October 10, 2024: 4-H Teen Council meeting

There were seven 4-H club members in attendance and 4 adults volunteers. The club welcomed a new member, Tucker Dailey. We discussed reaching out to current members that have not been in attendance. Hopefully they will attend future meetings.

- ◆ Service Projects—We will collaborate with other 4-H Groups about combining our efforts on service projects and fundraising. Other groups will meet this week and get back with the Teen Club.
- ◆ Fundraising Ideas were also discussed:
- ◆ We discussed the student collecting the following items for hurricane victims
- ◆ I Discussed presentation to Mr. Greg Waters—will do by the end of this week.
- ◆ New members—Great Fellowship with students. Proud to be a part of this group
- ◆ Discussed Achievement Applications. Each attendee received an application as well as a PIE (Enrollment Form) for this new year.— Submitted by Jackie Evans



4-H Country Ham Project Contracts due December 1, 2024

The Kentucky 4-H Country Ham Project during the 2023-24 4-H program year involved 1,029 youths across the state. It is the second year in a row that the project involved over one thousand youth. As part of the project fulfillment, the youth not only cured two country hams to enter in the contest at the Kentucky State Fair the first day of the fair but also made their way to Louisville to compete in the 4-H Country Ham Speech Contest.

For youth involved in the 4-H Country Ham Project, the program year begins in September as youth enroll in 4-H and attend 4-H Livestock Club meetings to earn their educational hours.

The ham project is designated a certified 4-H project in Kentucky. A certified project means that 4-H members must complete six hours of education to be eligible to compete in the project. The six hours must be completed by June 1, 2025.

The first step in enrolling in the project is to complete the 4-H Participant Information and Enrollment form. The next step is to attend the 4-H Livestock Club monthly meetings to earn their educational hours. The third step is to complete the Kentucky 4-H Country Ham contract and pay the fee of \$70 no later than the contract and registration fee deadline of December 1, 2023.

For more information on the 4-H Country Ham Project, contact me at your Montgomery County Extension Service office at 859-498-8741.

Certified 4-H Projects in Kentucky

4-H Country Ham project is part of the 4-H Animal Science program or 4-H Livestock program in Kentucky 4-H. It is also one of the projects Kentucky 4-H designates as a “certified project” which means that a required minimal amount of education hours must be completed before a member can compete in the events and contests offered in the project. A minimum of six educational hours must be attained by June 1, 2025. Attendance at monthly livestock club meetings is the way to earn educational hours. For more information about joining 4-H, you can contact me at the Montgomery County Extension Service office at 859-498-8741. Enrollment in 4-H Livestock must be completed no later than December 1, 2024.

MONTGOMERY COUNTY 4-H SADDLE CLUB



4-H Saddle Club members participated in the Homecoming Parade again this year.

LUKE BAKER will be participating in the NATIONAL CHICKEN BBQ CONTEST this November. Luke won the State competition back in the early summer and now has an opportunity to compete in the National 4-H Competition in Louisville. Let's wish Luke Good Luck in this contest.



National 4-H Congress—
 Jayla Sands was selected to attend National 4-H Congress this year in Atlanta, Georgia. She will be among 500+ youth that will participate in this annual 4-H Leadership Event. Youth must complete their 4-H Honors Achievement Gold Form to get an invitation to attend. The trip will be held on November 29—December 2, 2024. Charles Comer, 4-H Youth Development Agent will be going as a State Delegate Chaperon. From Kentucky we will have 28 youth attending. This Leadership Conference will include, community service learning projects, as well as individual groups helping out at centers around Atlanta.






5 WAYS YOUTH CAN PARTICIPATE IN 4-H

Organized clubs

Special Interest/ Short Term Programs

4-H Camp

School Enrichment

Individual Study

An Equal Opportunity Organization.

MONTGOMERY COUNTY 4-H LIVESTOCK CLUB

Livestock and Show & Sale met recently to wrap up the 2024 sale. The members along with saddle club and teen club members collected items for Hurricane Helene Victims and the MOCO school backpack program. Thanks to everyone involved.



MONTGOMERY COUNTY 4-H SHOOTING SPORTS CLUB NEWS



Cooperative Extension Service

4-H SHOOTING SPORTS

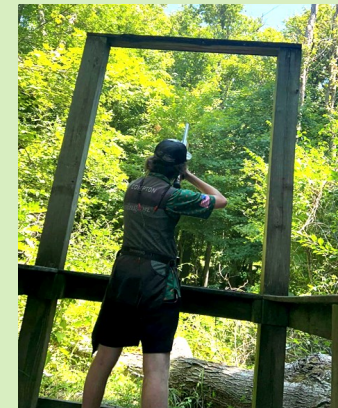
HITTING THE MARK FOR POSITIVE YOUTH DEVELOPMENT

The 4-H Shooting Sports program provides participants with a safe environment to explore their sparks, share a sense of belonging, and form healthy relationships with caring adult mentors.

Enrolled youth have opportunities to participate through competitions and teen leadership roles at not only the county level but also statewide and nationally.

To learn more about the program and how to participate in your community, contact your local county 4-H program.

Source: Ashley Marcum, Extension Specialist Associate
An Equal Opportunity Organization.





**FOR MORE INFORMATION
ON THE
MONTGOMERY COUNTY
4-H PROGRAM**

CONTACT:

CHARLES COMER

MONTGOMERY CO. EXTENSION AGENT
FOR 4-H YOUTH DEVELOPMENT
106 E. LOCUST ST.
MT. STERLING, KY 40353-1404
859-498-8741
ccomer@uky.edu

**4-H TEEN
CLUB**

Meets on
1st Thursday
@ 6:00 PM

**4-H
SADDLE CLUB**

Meets on
3rd Mondays
@ 6:30 PM

**4-H
LIVESTOCK
CLUB**

Meets on
3rd Tuesdays
@ 6:30 PM

**4-H
SHOOTING
SPORTS CLUB**

Meets on
4th Tuesdays
@ 6:30 PM

**C1-C2 AREA
4-H Teen
Council**

Meets
**EACH MONTH on
Last Monday of the Month**
@ 5:30 PM—leave from
Extension Office at 4:30 pm



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DID YOU KNOW?

4-H is addressing the gap by preparing our young people with the skills they need to succeed and harness their untapped talents to solve today's and tomorrow's challenges.

#amplify4h

An Equal Opportunity Organization.

Sincerely,

Charles M. Comer,
Montgomery County
Extension Agent for 4-H Youth Development

4-H PLEDGE I pledge my **HEAD** to clearer thinking,
my **HEART** to greater loyalty,
my **HANDS** to larger service,
and my **HEALTH** to better living,
for my club, my community,
my country, and my world. 

Civil Rights Act—Compliant Statement—The College of Agriculture, Food and Environment is an Equal Opportunity Organization with respect to education and employment and authorization to provide research, education information and other services only to individuals and institutions that function without regard to economic or social status and will not discriminate on the bases of race, color, ethnic origin, creed, religion, political belief, sex, sexual orientation, gender identity, gender expression, pregnancy, marital status, genetic information, age, veteran status, or physical or mental disability. Inquiries regarding compliance with Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Educational Amendments, Section 504 of the Rehabilitation Act and other related matter should be directed to Equal Opportunity Office, College of Agriculture, Food and Environment, University of Kentucky, Room S-105, Agriculture Science Building, North Lexington, Kentucky 40546, the UK Office of Institutional Equity and Equal Opportunity, 13 Main Building, University of Kentucky, Lexington, KY 40506-0032 or US Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410.

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