

Winnebago County 4-H Summer Camp Chaperone Request Form

Upham Woods June 26-29, 2025

Na	me:			Date:				
	First	Middle Initial	Last					
Add	dress: Street & Number		City	State	Zip			
Pho	one:		•	State	·			
	ail:							
	Chaperones should be 21 years of age or older. Do you meet this requirement? Yes No							
	Are you a registered 4-H Volunteer in 4HOnline? Yes No (if no, a 4-H Educator will contact you)							
4.	• • •							
5.	5. Please indicate which areas interest you the most:							
Cabin Recreation Nature / Adventures Arts/Crafts/Cultural Campfire / Evening Activities Healthcare Coordinator (*requires certification in first aid and cpr)								
6. Certifications: Indicate which of the following areas you are certified in. Please attach a copy of your certification card(s) with your camp application.								
	CPR First Aid	☐ Life Gu	ard Craft (canoe/kayak)		ss First Aid			
7. Please list your previous camp experience and/or other special skills that will make you a good fit as a camp chaperone (i.e crafts, sports, waterfront, nature, music, outdoor living, team building, etc.)								
The Wisconsin 4-H Program is subject to state federal equal employment opportunity laws which prohibit discrimination on the basis of gender, age, disability, race, color, religion, marital status, veteran's status, national or ethnic origin, or sexual orientation. Federal law requires reasonable accommodation for the known disabilities of applicants and employees, unless to do so would pose an undue hardship. If you need accommodation in order to complete the application process or take any required tests, please let us know.								
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Sin	nature.			Date:				

Return Completed Request and Chaperone Expectation Statement by March 1, 2025

Winnebago County 4-H Attn: Dana Berger

625 E County Rd Y Suite 600, Oshkosh WI 54901 Phone: 920-232-1974 Email: dana.berger@wisc.edu

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For Office Use Only:						
Position Assigned:						
Approved 4-H Volunteer? Yes No						
Interview Completed / Waived Date						
Required Camp Risk Management Training Completed? Yes	No Date_					
Required Youth Mental Health Training Completed? Yes	No Date	<u> </u>				
Health Form Completed? Yes No						
Chaperone Expectation Statement Completed? Yes No						
Special accommodations for health needed? Yes No						
If so please describe:						
Other Notes:						

Chaperone Position Description

Adult Advisors and **Chaperones** work closely with Youth Counselors to provide encouragement and guidance with lesson planning and activities before and during camp. Adult Advisors and Chaperones play a vital role in ensuring camper safety and forming positive youth -adult partnerships and also may have a dual role as a chaperone during camp.

All Adult Advisors will have the following expectations:

- Be familiar with all camp policies and procedures.
- Be familiar with / have an understanding of the roles for coordinators, Jr. Director, advisors, counselors, camp staff and chaperones.
- If requested, attend planning meetings to assist and facilitate an environment where youth counselors are taking the lead in creating and planning camp activities.
- Help guide the youth counselors to ensure camp policies are being followed.
- Troubleshoot and assist in special situations where there is conflict and where the youth counselor may be struggling to handle the situation.
- Report any accidents or severe behavior incidents to the Extension Staff (Camp Coordinators)

Prior to the official start of each camp, volunteers must complete orientation offered by the Camp Lead (or designee) that includes, but is not limited to:

- Camp rules
- Expectations for each role (e.g., chaperone, youth counselor)
- General behavior expectations
- Youth protection guidelines (as outlined in Extension's Handbook on the Protection of Vulnerable Populations from Abuse and Harassment) including, but not limited to:
 - supervision ratios
 - o rule of three
 - o leaving camp/transportation
 - o electronic communication/social media
 - o rules surrounding sleeping arrangements
 - respect for privacy
 - gender identity
 - o appropriate physical contact
- Responding to situations of bullying, harassment, abuse, or other prohibited behaviors by a youth or adult
- Review of risk management and emergency response procedures, including severe weather plan and use of/restrictions on use of hazardous materials.
- Parameters for leading any high-risk activities approved for the camp
- Supervising youth counselors

Orientation must be completed each year the volunteer works at camp.



CHAPERONE EXPECTATION STATEMENT

University of Wisconsin-Extension 4-H Youth Development Revised August 2015

Winnebago County 4-H Summer Camp June 26-29, 2025

Name:	County:

Capable caring adults play important roles in the lives of youth involved in UW-Extension Programs. This expectation statement acknowledges the need to provide the safest environments possible for youth. This form applies to all adults, paid staff and volunteers, accompanying youth on an UW-Extension-sponsored trip or event. The adult, by signing this form, agrees to conduct herself/himself in a responsible manner and abide by all expectations as stated below.

Adult Responsibilities Related to Chaperone Positions:

- 1. The adult will consider herself/himself the youth's support person, and be available throughout the duration of the program.
- 2. The adult will personally observe and verify the whereabouts of each youth for whom he/she has assumed supervision responsibility at least twice a day.
- 3. The adult will enforce all written and signed behavior expectations established for youth participation in the event. This will include room checks, when appropriate.
- 4. The adult will keep health and insurance information confidential.
- 5. The adult will not dispense medication, or anything relating to the physical or mental health of the youth, unless specifically directed in writing by the parent or guardian. The adult should be aware of any medications to be taken by youth.
- 6. In an emergency situation, the adult will act in the best interest of the youth and seek assistance from an event " coordinator, professional staff, medical and/or law enforcement personnel as needed.
- 7. The adult should provide the youth with information on how he/she can be reached and should be accessible to consult with youth participants when needed.
- 8. In the case of inappropriate youth behavior, the adult will consult with local and/or home county contacts in determining appropriate disciplinary action.
- 9. The accompanying adult will participate in assigned activities and assist as needed.
- 10. The adult will address situations involving bullying, hazing or harassment, and intervene if youth are being threatened, humiliated or intimidated by other youth or adults.
- 11. The use of any form of tobacco should be avoided in the obvious or known presence of youth.
- 12. Sexual contact of any type with youth is strictly forbidden. Any behaviors considered in violation of the Wisconsin child abuse and sexual assault laws are grounds for suspension of affiliation until investigation is completed.
- 13. The adult will observe the curfew hour. The adult is expected to remain in the housing facility during curfew hours.

Volunteer Behavior Expectations for Wisconsin 4-H Youth Development:

4-H Youth Development volunteers are expected to abide by the following behavior standards established by UW-Extension/4-H and to conduct themselves as positive role models for youth. All 4-H Youth Development volunteers are ultimately accountable to UW-Extension for their 4-H-related activities.

As a 4-H Youth Development Volunteer, I will:

- 1. Cooperate with and support UW-Extension staff to jointly further the mission of the UW-Extension.
- 2. Accept supervision and guidance from UW-Extension staff or designated management volunteers.

- 3. Conduct myself in a manner that is in the best interest of program participants and UW-Extension and will not use the volunteer position or title for purposes of private or personal gain.
- 4. Use appropriate University research based resources/information.
- 5. Make all reasonable efforts to ensure that programs are accessible to all individuals regardless of race, color, sex, creed, disability, religion, national origin, ancestry, age, sexual orientation, pregnancy, marital or parental status
- 6. Abide by all local, state and federal laws and UW-Extension and U.S.D.A. rules, policies and guidelines.
- 7. Conduct myself with courteous manners and language, exhibiting good sportsmanship, serving as a positive role model, treating others with respect, and demonstrating reasonable conflict resolution skills.
- 8. Not consume or be under the influence of alcohol or illegal substances while in the role of a UW-Extension volunteer, nor allow youth participants under my supervision to do so.
- 9. When transporting youth or adults, operate motor vehicles and other equipment in a safe and reliable manner and only with a valid operator's license and the legally required insurance. I will comply with all motor vehicle-related state regulations and laws.
- 10. Treat animals in a humane manner and teach program participants to provide appropriate animal care and management.
- 11. Report suspected verbal, sexual, physical abuse and neglect of youth to local authorities.
- 12. Not conceal carry firearms and/or weapons while acting in a volunteer role. I understand that if I am a 4-H Youth Development shooting sports volunteer, I am expected to openly carry/transport 4-H shooting sports equipment in designated areas.
- 13. Immediately notify my county UW-Extension Educator/Agent of any changes with my status (e.g. contact information, criminal arrest, charge or conviction history, driving privileges, etc.)

Support for Adults Accompanying Youth on UW-Extension-Sponsored Trips/Activities:

- 1. Orientation will be provided.
- 2. Youth taking part in overnight activities will submit a signed Expectation Statement that they understand the rules and the roles of the accompanying adult(s). Youth will be required to submit a health form that includes information on any special needs, medication to be taken and how to contact a parent or guardian.

Permission for UW-Extension to Take and Use Photographs/Recordings:

In addition, I understand that participants of this event may be photographed and/or recorded for 4-H promotional or educational materials. I also understand that no personal information about the participant, such as name, age or address, will be used with photos or recordings in promotional program materials. However, photos may be released to county Extension staff for local publication where participants may be identified. I give my permission to UW-Extension to use such images of this participant without any expectation of compensation.

Adult Leader's Statement of Agreement:

I have read, understand and agree to abide by these responsibilities and expectations for volunteers. I understand that suspension or termination of my position as a volunteer will result if I do not meet these expectations. Print name County

Signature of Adult Leader	Date
Printed Name	

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