



4-H

Written Communications

Contest

Categories Include:

Songwriting

Poetry

Original Monologue

Press Release

Public Service Announcement

"What 4-H Means to Me" Essay

AGES: 9-18

DEADLINE: FEBRUARY 20, 2024

Submissions must be emailed to
MaryAnne.Garnett@uky.edu





Kentucky 4-H Written Communications Contest Rules and Information

1. Each category will have a junior and senior class. Junior: Any member age 9-13 may compete in the writing contest as per their age determined on January 1st of the year in which the state contest is held. Senior: Any member age 14-19 may participate in the writing contest (must have passed their 14th birthday but have not passed their 19th birthday as of January 1st of the year in which the state contest is held).
2. Entries must be submitted by email to 4-H Agent Mary Anne Garnett by February 20, 2024.
Email: MaryAnneGarnett@uky.edu
3. Entries will be judged on the county level. Two junior and two senior entries per category will be submitted to the state level to be judged.
4. All contestants who win the county level contest must complete a 4-H enrollment form and submit it to MaryAnne.Garnett@uky.edu or to the Christian County Extension Office by February 26, 2024.
5. Each writing piece must be original. If there is a question, the participant will be disqualified. A statement of authenticity must be completed and attached to the entry. This is found on the entry form.
6. All Entries must be typed.
7. All entries are to be on 8" x 11" paper, with the entrant's class, name, and county on a cover page and last name typed on every page. (See attached sample cover page). Please include a scoring guide and entry form at the back of the piece.
8. Entries are to be double-spaced, typed with Calibri size 12 font white paper. (Songs may be single spaced within verses, chorus, and bridge and double spaced between each of these.)
9. Champions at the state level contest will be showcased at the Kentucky State Fair.
10. Songwriting can be found in the National 4-H Curriculum Picking up the Pieces, page 26. Information on Poetry can be found here: Ohio State University *The Writer in You*, page 32. Press Release and Public Service Announcement: National 4-H Curriculum *Putting It Together*, page 26. Monologue: National 4-H Curriculum Theatre Arts Level 1-Beginner, page 17.

Categories include: (Junior and Senior Classes for each category)

Songwriting

Poetry (3 line minimum and 25 line maximum)

"What 4-H Means to Me" Essay (minimum 500 words)

Original Monologue

Press Release (maximum of 1,000 words)

Public Service Announcement



Sample Coversheet

Category

Name

County



4-H WRITTEN COMMUNICATION CONTEST STATEMENT OF AUTHENTICITY

This is to verify that the piece I entered in the 4-H written communications contest is my original work. I further verify that this poem has never been published and has not been submitted to the 4-H contest before this year.

I give permission for my writing piece:

- to be submitted for judging.
- to be published in local and social media.
- to be displayed at the Kentucky State Fair.

Member's signature

Parent/ Guardian/Teacher signature

Date: _____



4-H Participant Information/Enrollment Form (NOT FOR RESIDENTIAL CAMP)

Note: The form must be completed by the participant and/or parent or guardian in order to participate in the 4-H program. **All items must be completed, even if the response is not applicable – indicate by using N/A (i.e. no health insurance).** Failure to complete this form in its entirety will result in the person being ineligible to participate in 4-H activities. Please print in blue or black ink to allow for photocopying.

Name: _____ County/Area: _____
 Preferred Name: _____ School Name: _____
 Address: _____ Birth Date: _____ Age: _____
 City: _____ State: _____ Zip: _____ Grade: _____
 4-Her Phone: _____ 4-H Year: _____ Gender: Female Male
 4-Her Email: _____
 Residence:
 Farm Town < 10,000 or Rural Non-Farm Town/City/Suburb 10,000-50,000 City/Suburb >50,000 City– Central >50,000
 Race (please choose more than one if applicable): American Indian Asian Black Native Hawaiian or Pacific Islander
 White Prefer Not to Say Not Listed: _____
 Ethnicity: Hispanic Non-Hispanic T-Shirt Size: _____

Parent/Guardian 1: _____ Phone number: _____
 Email: _____ Emergency Contact? Yes No
 Parent/Guardian 2: _____ Phone number: _____
 Email: _____ Emergency Contact? Yes No

Is any member of your family a current or former member of the United States Military or National Guard? Yes No

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 will not prevent a person from attending and will be kept confidential.

- | | Yes | No |
|--|--------------------------|--------------------------|
| 1) Asthma | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) Bronchitis..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) Convulsions..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 4) Diabetes..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 5) Ear Infection..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 6) Fainting..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 7) Heart Condition..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 8) Headaches..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 9) Hypoglycemia..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 10) Serious Allergy to Insects..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 11) Serious Allergy to Nuts..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 12) Serious Allergy to Gluten..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 13) Serious Allergy to Dairy..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 14) Wear Glasses/Contacts..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 15) Other Conditions..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 16) Other Allergy (please explain) | <input type="checkbox"/> | <input type="checkbox"/> |

Please explain any “yes” responses, including medications taken for any conditions:

Please explain any restrictions (dietary, physical, etc):

Social, emotional, and/or behavioral health information:

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

- Antihistamine Pill Antacid Ibuprofen (Advil) Hydrocortisone Cream
 Acetaminophen (Tylenol) Decongestant Dramamine Polysporin (topical antibiotic)

Medical Treatment

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.

SIGNATURE OF PARENT/GUARDIAN: _____ **DATE:** _____

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.

SIGNATURE OF /GUARDIAN: _____ **NO, I do not permit**

4-H Youth Development CODE OF CONDUCT FORM (NOT FOR RESIDENTIAL CAMPS)

All 4-H members and family/friends 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. The following guidelines are designed to make all 4-H events safe, meaningful, and satisfying to youth and others attending.

WHILE ATTENDING ALL 4-H MEETINGS, PROJECTS, PROGRAMS, ACTIVITIES AND EVENTS:

1. Each 4-H participant is expected to attend all planned sessions, workshops, field trips, and meetings of the event, and to be in appropriate attire. Dress codes will be specific to individual events. Delegation chaperones and/or volunteers are responsible for ensuring that members participate in all aspects of the planned program activities.
2. 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) are prohibited. Delegation chaperones and/or volunteers shall limit use of tobacco products to designated areas.
3. Possession of firearms not for educational use is prohibited.
4. Setting off fire alarms and tampering with fire extinguishing and other emergency equipment are prohibited.
5. Gambling of any type is prohibited.
6. 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.
7. Obscene, discriminatory and/or inappropriate language, roughhousing, and insubordination are prohibited at all times.
8. Display of overly affectionate or inappropriate attention between participants is prohibited.
9. 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.
10. All clothing shall be neat, clean, and acceptable in repair and appearance and shall be worn within the bounds of decency and good taste as appropriate for 4-H events. Articles of clothing which display profanity, products, or slogans which promote tobacco, alcohol, drugs, sex or are in any other way distracting, are prohibited. Each county may adopt additional Code of Conduct guidelines.

WHILE ATTENDING OVERNIGHT CONFERENCES, CAMPS, AND EVENTS, THE FOLLOWING WILL ALSO APPLY:

1. All participants are to be in their assigned area at curfew and comply with quiet hours, lights out, and other rules of the event.
2. No member or volunteer may leave the grounds without the permission of the conference director or adult in charge. An adult shall accompany a 4-H member any time they leave the grounds. Adults shall notify another adult in the delegation before leaving the grounds.
3. At overnight events, only conference participants may be in sleeping areas. Lounges or common areas may be used only for working committees and social activities.
4. Room service such as phone calls, food, laundry, or others shall not be permitted without chaperone permission.

Any violations of this Code of Conduct shall be reported promptly to the adult in charge of the delegation/program 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-H'ers and family/friends 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 his/her 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. By signing this document, I acknowledge that infraction of this Code of Conduct will result in any or all of the penalties listed above.

4-H ENROLLMENT FORM

Please bubble the clubs you are interested in below. The 4-H newsletter will include dates of club meetings and activities. We'll also send information out about clubs/activities to those who indicate interest once they are ready to begin. Once you have returned this enrollment form you may begin attending meetings. 4-H Age is 9-18 as of January 1, 2024 and Clover Buds are for ages 6 to 8 as of Jan. 1, 2024.

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Member/Volunteer

County:

Parent/Guardian

Date:

Cooperative 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.