OFFICE USE ONLY Date Received	Place in club File.
Date Reviewed	Initials of Extension Educator Reviewing

Oklahoma 4-H Youth Development	

TENSION Form 7

Activity and Event Intent Form

This form must be filed in the Extension Office anytime your club is doing something outside of the regularly scheduled club meeting date and time. Keep one copy for your records and file a copy with the extension office before the activity/event. Return by FAX, e-mail, US post office or personal delivery.

Examples of use: field trip, tour, overnight trip, conducting an event/activity such as a horse show, dog show, livestock show, community service project, project group meeting, etc.

Аст	IVITY	CLUB NAME Con	itact Person(s)			
DAT	E	TIME Pho	one				
Age of Youth Participants: Email							
Pui	RPOSE FOR THE ACTIVITY/EVENT:						
Loc	CATION/ADDRESS/PHONE NUMBER FOR T	HE ACTIVITY/EVENT.					
	(T		.6				
	TRAVEL/TRANSPORTATION PLANS – Include route, stops for food or breaks, etc. Be very specific with where you will be stopping and for what reasons. (Reason for stopping i.e. Stopping at Sulphur in route to Dallas. Stop will be for gas and restrooms. Or						
sto	stopping at Sulphur for a picnic lunch at Mason Park.)						
#	Overnight Activity/Event?			☐ Yes	□ No		
*	Do you have activity/event insurance?	CompanyPolicy #		☐ Yes	□ No		
*	Did you purchase extra insurance for h			☐ Yes	□ No		
*		on, Form 2 Prescription Medication, Form 4 Adult		☐ Yes	□ No		
	<u>Form 5 Adult 4-H Risk and Release</u> for information.	each participant? All forms have emergency con	itact				
*	Have you reviewed the health forms for	or any special conditions or other pertinent infor	mation?	☐ Yes	□ No		
*	Is there pre-registration for the event			☐ Yes	□ No		
		page two. If no, submit a list of participants imm	nediately				
90	following the event.				—		
*	Have you completed the Crisis Manag			☐ Yes	□ No		
*	Do you have copies of Form 8 Incident	t and Accidents?		☐ Yes	□ No		
#	Do you have a First Aid Kit with surgice	al gloves?		☐ Yes	□ No		

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Access/Supervision of Youth - Volunteers — List the name(s) of any adult/teen leader(s) involved with this activity/event and their duty/responsibility. Volunteers providing transportation or who will be in direct contact with youth must be certified volunteer in good standing, including WWM training. Any non-certified volunteer in immediate contact with youth, must be under the supervision of a "certified 4-H" volunteer" and understand their responsibilities.

	Certified 4-H		Specify Duty or Responsibility beside the name of
	Volunteer with		each Volunteer listed. (i.e. chaperon,
	current WWM		transportation, resource person, guest instructor,
Volunteer(s) Name	training.		etc.)
	☐ Yes	□ No	
	☐ Yes	□ No	
	☐ Yes	□ No	
	☐ Yes	□ No	
	☐ Yes	□ No	

Add addition sheet/spaces as necessary

4-H Members participating				

Add addition sheet/spaces as necessary

Signature of volunteer(s) with primary responsibility for planning/coordinating activity/event.

Signature	Date
Signature	Date

Keep one copy of the form with you during the event/activity and file a copy with the extension office before the activity/event.

Return by FAX, e-mail, US post office, or by personal delivery to your extension office.

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Crisis Management Planning This form and other pertinent authorization must be with you at the time of the event/activity. In the event of an emergency please be prepared to follow protocol. STEP ONE – Club Leadership or County Educator ☐ Done 1. Severe Weather/Fire/Evacuation Plan. Be sure it is communicated to youth and adults. ☐ Done 2. Call 911 or appropriate emergency personnel (Local hospital, minor emergency, etc.) Have medical release and insurance information available for emergency personnel/hospital/clinic. 3. See to any injured persons-using appropriate first aid. ASAP document treatment/action ☐ Done on Form 8. 4. Safety and security of other participants has been addressed to avoid further injuries or ☐ Done incidents. 5. Notify OSU Extension Office/Staff and be prepared to provide as much information as ☐ Done possible County Office # Alternate number: In the event the office is closed call: County Extension Director: 4-H Educator The Extension Office/personnel will continue communications through the appropriate protocol sequence. Do not talk to the any news media. All statements and information will be handled by OSU/OCES. 6. Call or instruct the Extension Office to contact all parents of youth participating in ☐ Done accordance with the Clery Act (federal statute codified at 20 U.S.C. § 1092(f)). Release children only to parents or guardians listed on the "in case of emergency" contact form. 7. Thoroughly complete and then file Form 8, Incident and Accident Form, with the ☐ Done Extension office immediately following the event. STEPS TWO – FOUR – handled by OCES personnel STEP FIVE— Post Crisis Recovery for Club and County Office 16. File any necessary post-trip insurance reports/forms with insurance company (crisis and ☐ Done non-crisis accidents). Be prepared for insurance claim questions. ☐ Done 17. Make sure the victims and their families understand exactly what happened. 18. Schedule sessions to deal with talking about the event. ☐ Done Take advantage of county and state resources for counseling, both for individuals and for the group immediately. Families need to be told what to expect. Continued communication with the families is important. 19. Keep records. Questions of liability are possible for 3 years after the age of majority (18 ☐ Done years old plus 3). ☐ Done 20. Return any belongings not claimed or lost during the accident/incident.

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