

4-H News

Hickman County



University of Kentucky
College of Agriculture,
Food and Environment
Cooperative Extension Service

Cooperative Extension Service

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Hello Everyone

Welcome to the 2024-2025 4-H Program Year! This years theme is Amplify 4-H! I hope that you will find an interest to explore in 4-H program here in Hickman County. Whether it is a new club membership, a subject to learn, or a commitment to volunteer - You Belong Here! Look out for ways to celebrate 4-H all year long. You will find events, news, and opportunities inside this newsletter each month. I am so glad you are here!

All the best, *Melissa Goodman*

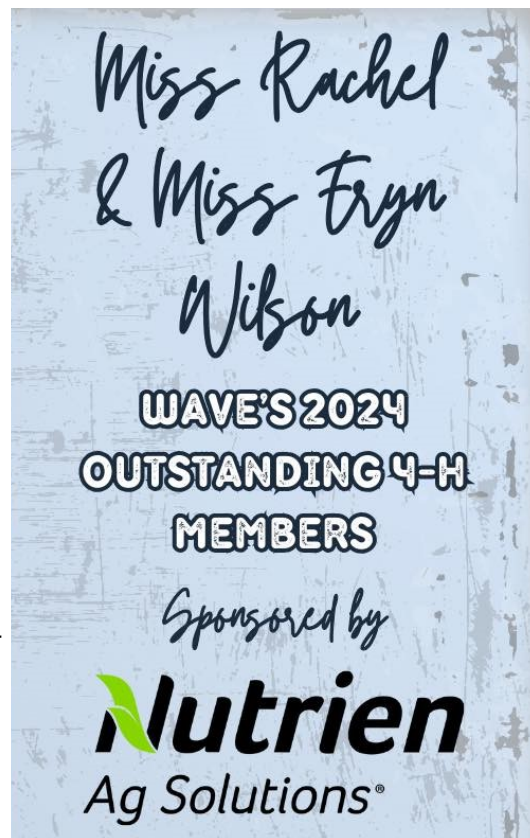
Melissa Goodman, Extension Agent for 4-H Youth Development Education

Eryn and Rachel Wilson are sisters and long-time Hickman County 4-H members. They are the daughters of Michael and Julie Wilson. Active in helping to grow the County 4-H program, they have served as delegates to the State Issues Conference, State Teen Conference, State Volunteer Forum. They enjoy volunteering on the county level, especially through the 4-H Camping program. They have volunteered as teen counselors for three different counties this summer and hope to serve on camp staff in the future.

Eryn Wilson is an active member and teen volunteer of Hickman County 4-H. In the 2023-2024 program year, she served as the West 1-West 2 4-H Teen Council Secretary and Delegate, President of the Tri-County 4-H Homeschool Club, and Vice-President of the Hickman County-Wide Teen Leadership Council.

Rachel Wilson is an active member and teen volunteer of Hickman County 4-H. In the 2023-2024 program year, she was elected as the State Teen Council delegate for West 1 and West 2. At the State Volunteer Forum, she earned the Master Volunteer Certification in Camping. She is the Hickman County-Wide Teen Leadership Council reporter and will serve as the West 1-West 2 Area Officer Team Secretary.

Eryn and Rachel exemplify teen leadership within the Kentucky 4-H Youth Development Program.



Cooperative Extension Service

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

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Disabilities accommodated with prior notification.



Learning & Meeting Calendar

Topic	Date and Time	Location and Age Group
4-H Area Teen Council Kick-off	September 09 @ 5:00 PM	Grand River Little Park Grades 7-12
Tri-County Homeschool Club	September 16	HCEO
4-H Sewing Club Interest Meeting	September 16 @ 3:00 PM	Hickman County Extension Ages 9-18
5th Grade 4-H Clubs	September 26	HCES
HCMS 4-H Middle School Club	September 26	HCMS Grades 7-8
HCHS 4-H High School Club	September 26	HCMS Grades 9-12
3rd Grade 4-H Explorer Clubs	September 30	HCES
Cloverbuds Club Afterschool	September 30 @ 3:00 PM	Hickman County Extension Ages 5-8
4-H Teen County-Wide Teen Council Kickoff	September 30 @ 5:00 PM	Hickman County Extension Grades 7-12
Hunter Safety Class	September 30 & October 1	HCEO– Must be age 9 by day of class
Ag Safety Day	October 4	HCES
4-H Sewing Club	October 07	HCEO
4-H Fishing Club	October 17 @ 3:00 PM	Rotary Park/Lake
4-H Teen Retreat	October 25-27	West Ky 4-H Camp Grades 8-12



**YOUTH AGES 9-18
INTERESTED IN SEWING?**

***4-H SEWING CLUB
INTEREST MEETING***

SEPTEMBER 16

**3:00 PM @ Hickman County Extension
Call 270-653-2231 to RSVP**

AMPLIFY
KENTUCKY 4-H 

Sign Up for our Digital News, by scanning the QR code below and filling out the form. 4-H Focus will be a way to quickly disseminate information about County, Area and State 4-H Programs.



**Fishing Club,
Afterschool Programs
and much more are
coming....**

Sign up for Hickman County 4-H Remind. Our Remind Code is 4h-hc. You can text the message @4h-hc to the number 81010 or On your iPhone or Android, open your web browser and got to the follow link: rmd.at/4h-hc



KENTUCKY 4-H PROGRAM YEAR 2025

SEPTEMBER 1, 2024-AUGUST 31, 2025



HOW OLD WILL YOU BE ON
JANUARY 1, 2025?
THAT IS YOUR 4-H AGE!

How can we make a difference?

*Find a place to serve in the
community*

Quote of the Month

"Life is a lot more interesting if you are interested in the people and the places around you. So, illuminate your little patch of ground, the people that you know, the things that you want to commemorate. Light them up with your art, with your music, with your writing, with whatever it is that you do."

- Alan Moore

What we are excited
about?



*4-H Classroom Clubs starting in
3rd grade, 4th grade, 5th
grade, 6th grade. Club Day
Clubs for 7-12th and
Homeschool and Clover Bud
Clubs starting!*

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HICKMAN COUNTY 4-H

JOIN OUR CLOVERBUDS CLUB

EXPLORE 4-H IN A POSITIVE AND FUN ENVIRONMENT



Make a fun and nutritional snack each club meeting, explore the seven areas of 4-H through hands on activities, and learn about good character and citizenship!

SEPTEMBER 30TH 3:00-4:00 PM
HICKMAN CO. EXTENSION OFFICE
CALL 270-653-2231 TO REGISTER
MAX. 25 YOUTH

AGES 5-8
AS OF JAN. 1, 2025





Ky State Fair Results

Ava Morris

White Ribbon- Foods (Granola Bars)
Blue Ribbon- Home Environment (Unit 1, Wastebasket)

Peyton Workman

Red Ribbon- Foods (Cheese Muffins)
Blue Ribbon- Foods (Cornmeal Muffins)

Leeyah Peyton

Red Ribbon- Horticulture (Tomato Cherry)
Red Ribbon- Arts & Crafts (Jr. Black Pencil)
Red Ribbon- Sewing (Non-Clothing Option)
Red Ribbon- Foods (Cheese Muffins)
Red Ribbon- Foods (Cornmeal Muffins)
Red Ribbon- Home Environment (Accessory for the Home)
White Ribbon- Trends (Jr. Upcycling Project)

Piper Bailey

Blue Ribbon- Foods (Snickerdoodle Cookies)

Kori Hamilton

White Ribbon- Photography (Farm Equipment/Implement)

Sophie Wilson

Blue Ribbon- Arts and Crafts (Jr. Acrylic Painting)
Blue Ribbon- Arts and Crafts (Junior Water Color)
Blue Ribbon- Arts and Crafts (Junior Color Pencil)

Blue Ribbon- Arts and Crafts (Junior Clay)

Reese Clark

White Ribbon- Photography (Companion Animals)
Red Ribbon- Photography (FCS, Family)
White Ribbon- Photography (FCS, Culture)
Red Ribbon- Photography (Health, Physical Activity)
White Ribbon- Photography (Music)
White Ribbon- Photography (Arts Creation)

Aiden Wilson

Blue Ribbon- Wood Science (Level 1, Not from a Kit)
Blue Ribbon- Arts & Crafts (Junior Leather Craft)
Blue Ribbon*- Arts & Crafts (Junior Heritage)- *CLASS CHAMPION- DIVISION RESERVE CHAMPION
Red Ribbon- Photography (Water)
Blue Ribbon- Photography (Natural Scenic)
Red Ribbon- Photography (Insect)
Red Ribbon- Photography (SET, Machinery)
Red Ribbon- Trends (Jr. 4-H Cupcake Decorating)

Blue Ribbon- Arts & Crafts (Jr. Black Pencil Drawing)

Jonah Dixon

White Ribbon- Photography (Agriculture scenic)
White Ribbon- Crop Science (Red popcorn- ear, previous year)

Red Ribbon- Crop Science (Yellow-Ear corn, current year)

Red Ribbon- Crop Science (Yellow-shelled corn, previous year)

Ava Dixon

Red Ribbon- Photography (Wildlife)
Red Ribbon- Photography (Crops)
White Ribbon- Photography (Urban Scenic)
Blue Ribbon- Photography (Architecture)
Blue Ribbon- Photography (Energy)

Sophie Morris

Red Ribbon- Home Environment (Unit II, Cloth-Item for the Home)
Blue Ribbon- Trends (Jr. General Cupcake Decorating)

Allison Lindsey

Red Ribbon- Photography (Native Plants)
White Ribbon- Photography (Careers in Health)
Red Ribbon- Photography (Instrument/Art Utensils)
Red Ribbon- Photography (Created Art in the Community)
Red Ribbon- Foods (Rolled Biscuits)
White Ribbon- Foods (Soft Pretzels Color)

We would like to invite you (8th -12th grade) to participate in the **4-H Teen Retreat** to be held **October 25-27, 2024** at the **West Kentucky 4-H Camp**. You will enjoy spending a relaxing, leadership based, fun-filled weekend with your friends and fellow teens from around Western Kentucky!! Additional activities will include karaoke, dances, movies, mixers, great food, and numerous other exciting events and activities!!

The cost of the retreat will be **\$90.00** which includes all meals, refreshments, lodging, most classes, and retreat t-shirt. This is a very affordable retreat and should be a wonderful experience. You should return the registration forms **to Hickman County Extension Office by October 4**. Include check made payable to **Hickman County 4-H Council**.

HCCHS 4-H Middle School and HS Teen Club will meet September 27 on HC Club Day.

[Participant Forms](#) are required. This is a free club, so no dues.



HOMESCHOOL 4-H CLUB SCHEDULE

2024-2025 4-H Year

September 16 10:30 AM-12:00 PM

October 28

November 25

January 27

February 24

March 24

April 28

KENTUCKY  
COOPERATIVE EXTENSION

AMPLIFY 
KENTUCKY 4-H



Hunter Education Student Course

September 30th 4:00-8:00 PM

AND

October 1st 4:30-5:30 PM

at

UK Hickman County
Cooperative
Extension Service

329 James H. Phillips Dr.
Clinton, KY 42031



Scan QR Code or call the office at 270-653-2231 for more information.

 **4-H GROWS HERE**

County-Wide Teen Council
Open to all Hickman County Teens
Grades 7-12

1st Meeting | September 30
5:00 PM @ Hickman County
Extension Office

Leadership- Games- Food

Save the Dates

- 10/25 - West KY Teen Retreat
- 11/14-16 - Issues Conference
- 3/20-22- 4-H Summit
- 6/9- 12 State Teen Conference



FOLLOW
US ON INSTAGRAM

@HICKMANCO4H

OCT 

SAVE THE DATE **15**

 **STORYWALK AT THE FARMERS MARKET**



Volunteer Needs

We are in great need of 4-H Leaders for Hickman County. The traditional 4H year begins in September, and we want to start off strong with new clubs that our youth can be part of. Please consider sharing a talent with youth by being a 4-H Leader. We are here to support you every step of the way.

But what can I do ? Here are some ideas!

Opportunities by Position

- Club Leader– creates club and provides lessons
- Parent Support Leader– provides supervision, transportation, and assistance for clubs
- 4-H Council Member– helps plan programs, fundraise, and support large 4-H events
- 4-H Committee Member– helps plan and implement a specific event
- 4-H Camp Adult Leader– supervises a cabin at 4-H camp
- 4-H Camp Teen Leader– assists at 4-H camp with a cabin and class
- 4-H Event Assistant– helps plan and implement a yearly program or event
- Teacher or Community Leader– a teacher or partner who implements 4H curriculum within their classroom or program

Opportunities by Age

- Cloverbuds (Ages 5-8)
- Teens (Ages 14-18)

Opportunities by Group

- Community Clubs (specific to areas)
- Afterschool Clubs (specific to schools)
- Homeschool

Opportunities by Subject

- Agriculture
- Leadership
- Natural Resources
- Shooting Sports
- Family and Consumer Sciences
- STEM
- Health
- Communications
- Arts

92%

say volunteering with 4-H makes communities stronger

81%

say volunteering with 4-H improves the health of communities


89%

say volunteering with 4-H contributes to better connected communities

78%

say volunteering with 4-H increases civic involvement

Graphic : <https://extension.umn.edu/about-4-h/4-h-volunteer-impact-study>



4-H CAMP



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: _____



LEARNING.

DOING.

MAKING THE BEST BETTER.

