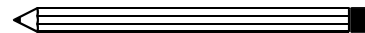


AMERICAN DAIRY GOAT ASSOCIATION

2017 National Show Youth Permission Form



YOUTH ACTIVITIES CODE OF CONDUCT

ADGA Youth participating in National Show Youth Activities and Contests sponsored by the ADGA Youth Activities Committee are required to conduct themselves according to this Code of Conduct. The Code operates in conjunction with the rules and regulations of the specific event.

- Possession or consumption of alcohol is prohibited.
- Possession or use of illegal drugs is prohibited.
- Possession or use of a weapon is prohibited.
- Willful destruction of property is prohibited.
- Excessive noise or running/playing in the barn or around animals is prohibited.
- Other conduct determined to be inappropriate for an ADGA National Show by the National Youth Activities Chair, Committee, or the National Show Chair is prohibited.

Violation of the above Code of Conduct will result in the following actions:

- A. The adult chaperone for the youth involved (as identified below) will be made aware of the situation.
- B. The youth will be turned over to the parent/guardian.
- C. The youth can/may be barred from participating in National Youth Activities for that year and any awards already won for that year may be revoked.
- D. The youth will not be considered for Premier Youth Exhibitor.
- E. The youth can/may be asked to leave the show site.
- F. When warranted (e.g., violation of state/federal law) the situation may be turned over to local authorities.
- G. Participants and their parent/guardian accept financial responsibility for the cost of the enforcement of the agreement and of any damage to persons or property caused by the participant.

MEDICAL CONSENT

I give permission for emergency care to be sought for

at a physician's office, clinic or hospital if the parent or guardian cannot be reached in the event of injury. I hereby release the hospital, its medical staff, nursing staff and physician from any liability that may arise out of any medical procedure performed pursuant to this consent form that is necessary for proper treatment of medical emergencies. I understand that I am financially responsible for charges and hereby guarantee full payment to the attending physician and/or health care unit. Following are any food or drugs to which the above named is allergic, as well as any other information, medical or physical, that should be known.

Health Insurance Provider and Number:

Youth's Date of Birth _____

Phone number(s) to contact in case of emergency:

PARTICIPATION AND ADVERTISING AGREEMENT

My parent/guardian and I have read and understand the ADGA National Show Youth Activities Code of Conduct and Medical Consent. We agree that I will conduct myself in accordance with this code. We agree to release the American Dairy Goat Association, and assisting members thereof, from any claim for injuries or damage of any nature sustained while participating in the youth activities of the 2017 ADGA National Show. We also agree that my name and picture can be used by ADGA for promotional purposes.

Print Name of Youth Participant _____ ADGA ID# _____

Signature of Youth Participant _____ Date _____

Print Name of Parent/Guardian _____ ADGA ID# _____

Signature of Parent or Guardian _____ Date _____

YOUTH ACCOMMODATIONS: If you would like to request learning or physical accommodations (i.e. during the management contest examination), please detail those below.

AUTHORIZED PARENT OR GUARDIAN

Each participant in the youth activities at the 2017 ADGA National Show is required to have an identified adult chaperone (over age 21) who is responsible for that youth. This must be a person who will be present at the National Show during the youth events. This person will be contacted and held responsible for the youth should a code of conduct violation occur.

Name of Designated Chaperone State in which Chaperone resides _____

Farm Name of Designated Chaperone _____

Name of Parent/Guardian _____

Parent/Guardian Home Phone _____ Parent/Guardian Work Phone _____

Youth/Chaperone housing arrangement:

Barn Campground Hotel _____

If the adult chaperone is someone other than the youth's parent/guardian, it is the responsibility of the parent/guardian to notify the individual and obtain his/her permission to be listed as the designated chaperone. The designated chaperone should also have the youth's health and insurance related information available in case of an emergency.



PO Box 865
Spindale, NC 28160
Phone 828-286-3801
Fax 828-287-0476
www.ADGA.org

We suggest you keep a copy of this agreement.

(Complete reverse side)



AMERICAN DAIRY GOAT ASSOCIATION
National Show Youth Events
July 8-13, 2017

Name		
Date of Birth	ADGA ID#	
Address		
City	State	Zip
Phone	Fax	Email

Mark contest(s) in which you would like to participate and any other applicable item(s).

YOUTH SHOWMANSHIP CONTEST		
<input type="checkbox"/>	Entering doe in Showmanship Contest, but NOT exhibiting in Open Show (\$10.00 pen fee)	These pens are only to be used by youth who are participating in the youth events and not the remainder of the National Show. Showmanship does that will be removed from the premises on Monday morning may use these pens for the weekend. However, if the doe will be competing in the open show or is to be housed with other animals, DO NOT purchase one of these pens. Those animals will need a pen purchased with your open show entry forms. Special pen assignments are at the discretion of the Show Committee, and cannot be guaranteed, but they will do their best to accommodate special requests.
<input type="checkbox"/>	Entering doe in Showmanship Contest, and will be exhibiting in Open Show (NO FEE)	
<input type="checkbox"/>	Junior (ages 10 and under)	
<input type="checkbox"/>	Intermediate I (ages 11-13)	
<input type="checkbox"/>	Intermediate II (ages 14-16)	
<input type="checkbox"/>	Senior (ages 17-20)	
YOUTH FITTING TEAM CONTEST		
<input type="checkbox"/>	Fitting Team Contest	
YOUTH JUDGING CONTEST		
<input type="checkbox"/>	Junior (ages 14 and under)	
<input type="checkbox"/>	Senior (ages 15-20)	
TOTAL ENCLOSED = \$ _____		

To assist the committee in planning these events, please complete both sides of this sheet and
RETURN TO ADGA BY June 12, 2017.