

Information about Wisconsin 4-H: 4h.uwex.edu

For assistance with 4HOnline or the enrollment process, contact your local UW-Extension staff.

Important note!!

If you attempt to create a profile, and 4HOnline indicates that your email address is already on file, please DO NOT create a new profile for your family with a different email address. Instead, either use the "forgot my password" option below or contact your county UW-Extension office to have your password reset.

If you are experiencing issues with 4HOnline and you are using Internet Explorer, you must use a different web browser. Click on one of the following:

[Firefox from Mozilla](#)

[Chrome from Google](#)

1. Enter E-Mail and Password

Enter your e-mail and password from when you first created an account. If you have forgotten your password, click the bubble "I forgot my password," enter your e-mail, and click "Send My Password". You will then be sent a temporary password to reset it. If you have forgotten which e-mail you use to log in or are having trouble, contact the Extension Office at 715-346-1462.

I have a profile
 I need to setup a profile
 I forgot my password

Email:

Password:

Role: Family

2. Click Login

Left-click "Login" to access the family home screen.

Login





Logged in as Leader

Change Password

My Meetings

Announcements & Newsletters

User Roles
Apr 30, 2014 Z-Train County

Continue to Family ▶

2. Continue to Family
Left-click "Continue to Family" to see your member list.

Club Leader Login

Select a profile ... No items available Password: Login to Club

Project Leader Login

Select a profile ... Password: Login to Project

If your enrollment status is **Inactive or Incomplete**, click the **Edit** button to review and submit your record for approval.

If your enrollment status is **Pending**, your record is complete and waiting for county office approval.

Leader Family [Edit Family](#)

123 Any Street
Madison, WI 53703
608-123-4567
4hplus.help@ces.uwex.edu
Z-Train County [\[contact info\]](#)

Add A New Family Member

select a member type... 

[Add Member](#)

Member/Volunteer List						
	Name	Role	Membership ID	Enrollment Status	Last Active Year	Edit
1)	Chilton Chickens Leader	Adult	563907	Active	2015-2016	Edit 
✓ Volunteer Screening		Approved (2013-2014)				
2)	Fruits Leader	Adult	565416	Active	2015-2016	Edit 
✓ Volunteer Screening		Approved (2013-2014): No Restrictions				
3)	Garfield Gaggle Leader	Adult	563982	Inactive	2013-2014	Edit 
4)	Jim Bob Leader	Adult		Inactive		Edit 
5)	Test Leader	Adult		Pending		Edit 
☐ Volunteer Screening		Pending (2015-2016):				View

Member Reports

Member:

Report:

Register A Member In An Event

Member:

Event:

1. Add a New Member
Left-click the drop-down menu and select "Adult."

If you are a parent or guardian who does not intend to volunteer or participate in club activities, you do not need to enroll yourself.

2. Add Member
Left-click "Add Member" to begin creating the adult's profile.

For assistance with 4HOnline or the enrollment process, please contact your local UW-Extension staff.

Profile Information * Required Fields

Email:	<input type="text" value="test2@zz-test.com"/>	joe@4honline.com
* First Name:	<input type="text" value="Jim Bob"/>	
Middle Name:	<input type="text"/>	
* Last Name:	<input type="text" value="Leader"/>	
* Mailing Address:	<input type="text" value="123 Any Street"/>	
* City:	<input type="text" value="Madison"/>	
* State:	<input type="text" value="Wisconsin"/>	
* Zip Code:	<input type="text" value="53703"/>	12345
* Gender:	<input type="text" value="Male"/>	
* Primary Phone:	<input type="text" value="608-123-4567"/>	555-555-1234
Correspondence Preference:	<input type="text" value="Mail"/>	
Cell Phone:	<input type="text"/>	555-555-1234
You wish to receive notices via text message:	<input type="checkbox"/> @ <input type="text" value="Select your provider ..."/>	
Work Phone:	<input type="text"/>	555-555-1234
Work Extension:	<input type="text"/>	#
Fax:	<input type="text"/>	555-555-1234
* Years in 4-H:	<input type="text" value="2"/>	#
* 4-H County:	<input type="text" value="Z-train"/>	

1. Profile Information
Left-click each of the fields and enter the requested information. For drop-down menus, select an option from the ones presented.

The bold fields are **required** before you can proceed.

2. Scroll Bar
Left-click and hold the scroll bar or use a mouse wheel to fill out the bottom sections of this screen.

Volunteer

Volunteer

Select "Yes" if you serve in a leadership capacity in 4-H.
Examples for youth: Junior Leader, Club Officer, etc.
Examples for adult: Chaperone, Community Club Leader, Project Leader, etc.

Are you a Volunteer?: No: Yes:

Ethnicity

Are you of Hispanic or Latino ethnicity? No Yes [Need help?](#)

Race

Check all the races that apply to you. If you selected "Not Hispanic", you must select at least one option. [Need help?](#)

White:
Black or African American:
American Indian or Alaskan Native:
Native Hawaiian or Pacific Islander:
Asian:
Prefer Not to State:

Residence

Farm:
Town under 10,000 and rural non-farm:
Town/City 10,000 - 50,000 and its suburbs:
Suburb of city more than 50,000:
Central city more than 50,000:

Military Service of Family

Family Member Military Service:
Branch of Service:
Branch Component:

[Return to Member List](#) [Continue >>](#)

1. Volunteer
Left-click the second circular button to check "Yes." All Adult 4-H members are volunteers.

2. Demographic Info
Left-click the buttons next to the statements that best describe you. You do not have to list a race if you prefer not to state it.

All of this information is kept strictly confidential and is used by the state for its federal reporting requirements.

3. Military Service
To change your family's military service status, left-click the top drop-down menu and select the answer that best describes you. To select branch of service and component (if applicable), left-click those drop down menus and make your selections.

4. Continue
If all information is completed, left-click "Continue >>"



Additional Information

I UNDERSTAND THAT I AM BEING ASKED TO READ EACH OF THE FOLLOWING PARAGRAPHS CAREFULLY. I UNDERSTAND THAT IF I WISH TO DISCUSS ANY OF THE TERMS CONTAINED IN THIS AGREEMENT, I MAY CONTACT MY ENROLLED COUNTY'S 4-H YOUTH DEVELOPMENT EDUCATOR OF THE UW-EXTENSION. CONTACT INFORMATION CAN BE FOUND BY CLICKING ON THIS LINK.

IF YOUR SON, DAUGHTER OR WARD WILL BE UNDER 18 WHILE PARTICIPATING IN THE ENROLLED COUNTY 4-H YOUTH DEVELOPMENT PROGRAM AT THE UNIVERSITY OF WISCONSIN-EXTENSION IT IS OUR POLICY TO REQUEST YOUR AGREEMENT TO THE BELOW TERMS, ON BEHALF OF YOUR MINOR SON, DAUGHTER OR WARD. I UNDERSTAND THAT MY E-SIGNATURE SHALL HAVE THE SAME LEGAL FORCE AND EFFECT AS MY HAND-WRITTEN SIGNATURE ON EACH AGREEMENT BELOW.

THE COUNTY I SELECTED WHILE SETTING UP MY PROFILE IS MY ENROLLED COUNTY.

For assistance with 4HOnline or the enrollment process, please contact your local extension staff: www.uwex.edu/ces/cty

1. Assumption of Risk

I understand that not all risks can be foreseen and there are some risks which are unpredictable. I understand there are certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. I am aware of the risks of participation, which include, but are not limited to, the possibility of physical injury, fatigue, bruises, contusions, broken bones, concussion, paralysis, and even death. I understand that the county and university have advised me to seek the advice of my physician before participating in my enrolled county's 4-H Youth Development program. I understand that I have been advised to have health and accident insurance in effect and that no such coverage is provided for me by my enrolled county's UW Extension, 4-H leaders association, or the Board of Regents of the University of Wisconsin System. **I know, understand, and appreciate the risks that are inherent in the above-listed programs and activities. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.**

I have read, understand, and agree to the above.

REQUIRED

2. Hold Harmless, Indemnity and Release

In consideration of my participation in these activities, I, for myself, spouse, heirs, personal representatives, estate or assigns, agree to defend, hold harmless, indemnify and release, my enrolled county's UW Extension, 4-H leaders association, the Board of Regents of the University of Wisconsin System and their officers, employees, agents and volunteers who are involved, from and against any and all claims, demands, actions, or causes of action of any sort on account of damage to personal property, or personal injury, or death which may result from my participation in the above-listed program. This release includes claims based on the negligence of my enrolled county's UW Extension, 4-H leaders association, the Board of Regents of the University of Wisconsin System and their officers, employees, agents and volunteers, but expressly does not include claims based on their intentional misconduct or gross negligence. **I understand that by agreeing to this clause I am releasing claims and giving up substantial rights, including my right to sue.**

1. Checkboxes
Read the terms and conditions and left-click each checkbox on this screen to agree.

2. Scroll Bar
Left-click and hold the scroll bar or use a mouse wheel to fill out the bottom sections of this screen.

UW-Extension volunteers are expected to abide by the following behavior standards established by UW-Extension and to conduct themselves as positive role models for program participants. All UW-Extension volunteers are ultimately accountable to UW-Extension for their UW-Extension related activities.

As a UW-Extension volunteer, I will:

- Cooperate with and support UW-Extension staff to jointly further the mission of the UW-Extension.
- Accept supervision and guidance from UW-Extension staff or designated management volunteers.
- 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.
- Use appropriate University research based resources/information.
- 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.
- Abide by all local, state and federal laws and UW-Extension and U.S.D.A. rules, policies and guidelines.
- 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.
- 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.
- 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.
- Treat animals in a humane manner and teach program participants to provide appropriate animal care and management.
- Report suspected verbal, sexual, physical abuse and neglect of youth to local authorities.
- 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.
- 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.)

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

I agree REQUIRED

5. Photo Release

I grant 4-H Youth Development, UW-Extension and the University of Wisconsin Board of Regents the right to publish, and copyright my image (including audio, moving image or photography) for educational programs, websites, and promotion of its programs.

Yes
No

Alumni

Were you in 4-H as a youth? Yes

Accommodations

Do you require an accommodation for a disability to participate in this program? No

<< Previous Continue >>

1. Checkboxes
Continue reading the terms and conditions and left-click the checkboxes to agree. The photo release is not required.

2. Status Info
Left-click these drop-down menus and left-click the options best describing you.

3. Continue
When all checkboxes are selected and information is updated, left-click "Continue >>"



Logged in as Leader: Practice

Home | My Member List

Enrollment Member Settings Trainings



Health Form

Please note: This form is not required at the time of enrollment, but you may be asked to fill it out when registering for certain events/camps/programs.

Your Age: X

Emergency Contact

Name:

Relationship:

Primary Phone Number: 555-555-1234

Secondary Phone Number: 555-555-1234

Street Address:

City:

State:

Zip: 12345

Health Conditions

Do you have any of the following conditions?

Asthma:

Diabetes:

Epilepsy:

Any dizziness, light-headedness or fainting associated with exercise within the past year:

1. Health Form

An updated health form is not required at the time of enrollment, but you will be asked to update it if you chaperone a camping trip or attend another applicable event.

Left-click the fields to enter information.

2. Scroll Bar

Left-click and hold the scroll bar or use a mouse wheel to fill out the bottom sections of this screen.

#1 Dosage (mg):

#2 Medication

#2 Name of Medication:

#2 Reason:

#2 Dosage (mg):

#3 Medication

#3 Name of Medication:

#3 Reason:

#3 Dosage (mg):

#4 Medication

#4 Name of Medication:

#4 Reason:

#4 Dosage (mg):

Consent for Medication Administration and Medical Treatment

By signing below,

- I am giving my consent in advance for medical treatment at an appropriate medical facility in case of illness or injury.
- I am stating that I am aware of and accept the risk inherent in the event/camp/program activity.
- I attest that all information on this form is correct.
- I agree to hold harmless and indemnify the Board of Regents of the University of Wisconsin System, and the University of Wisconsin-Extension, their officers, agents and employees from any and all liability, loss, damages, costs, or expenses which are sustained, incurred or required arising out of my actions in the course of the event/camp/program.

Sign by typing your name.:

Date:  mm/dd/yyyy

<< Previous **Continue >>**

1. Signature
If you have filled out the health form, left-click the blank field and type your legal name.

2. Date
If you complete the health form, left-click the field and enter the current date in mm/dd/yyyy format. You can also left-click the calendar icon and select today's date on the window that appears.

3. Continue: Left-click "Continue >>" to save your changes and proceed to the next screen.

Volunteer Screening

Identification

Driver's License Number:

Date of Birth: mm/dd/yyyy

1. I am applying to be a 4-H volunteer and acknowledge and understand that, through this application, my record will be checked.

I agree.:

2. Have you been a full time resident in Wisconsin during the past 3 years?

:

3. If "no" to above, list non-Wisconsin address(es), including county and state, of residence(s) during the past 3 years:

:

4. If you have not lived in Wisconsin during the past 3 years, please list 3 people (not relatives) who can comment on your work with youth:

Reference 1

Name:

Relationship to you:

Phone: 555-555-1234

Address:

Reference 2

Name:

Relationship to you:

1. Volunteer Screening
Left-click the fields next to each applicable item and type your answer. Questions 3 and 4 are required only if you have not been a full-time resident in Wisconsin during the past 3 years.

2. Scroll Bar
Left-click and hold the scroll bar or use a mouse wheel to fill out the bottom sections of this screen.

Relationship to you:

Phone:

555-555-1234

Address:

5. Has your driver's license been suspended or revoked within the last 10 years?

:

6. Have you been convicted of crime involving a minor (including a deferred imposition of sentence)?

:

7. Have you used or been known by any other names, e.g., maiden name, previous marriage, or legally-changed name?

:

If "yes," what names have you used?:

8. I acknowledge and agree that I or UW-Extension may terminate the volunteer agreement at any time. I certify to the best of my knowledge that these responses are true and complete. I hereby authorize UW-Extension to conduct a police and court investigation of my background.

I agree.:

Leader enrollment is not complete until you have attended a volunteer orientation and a background check has been completed.

<< Previous

Continue >>

1. Continue: When all applicable information is entered, click "Continue > >" to save your work and proceed to the last section



You must select one club. If you are new to 4-H and have not already connected with a club, contact your local UW-Extension staff to help identify a club that will meet your needs.

IMPORTANT!! - please read this BEFORE deleting a Club:

When deleting a club, all Project enrollments associated with that Club will also be deleted. If you desire to switch Clubs, contact your local UW-Extension office and they can change your club without deleting your projects.

If you are a Project Leader in a club, then select your club here, but leave leader type blank. You will select your project and select Project Leader on the next page.

Add a Club

Select a Club

Add Club

Club List

[New Look]

Primary	Club	Edit
<input checked="" type="radio"/>	Chilton Chickens	Delete

<< Previous

Continue >>

Submit Enrollment

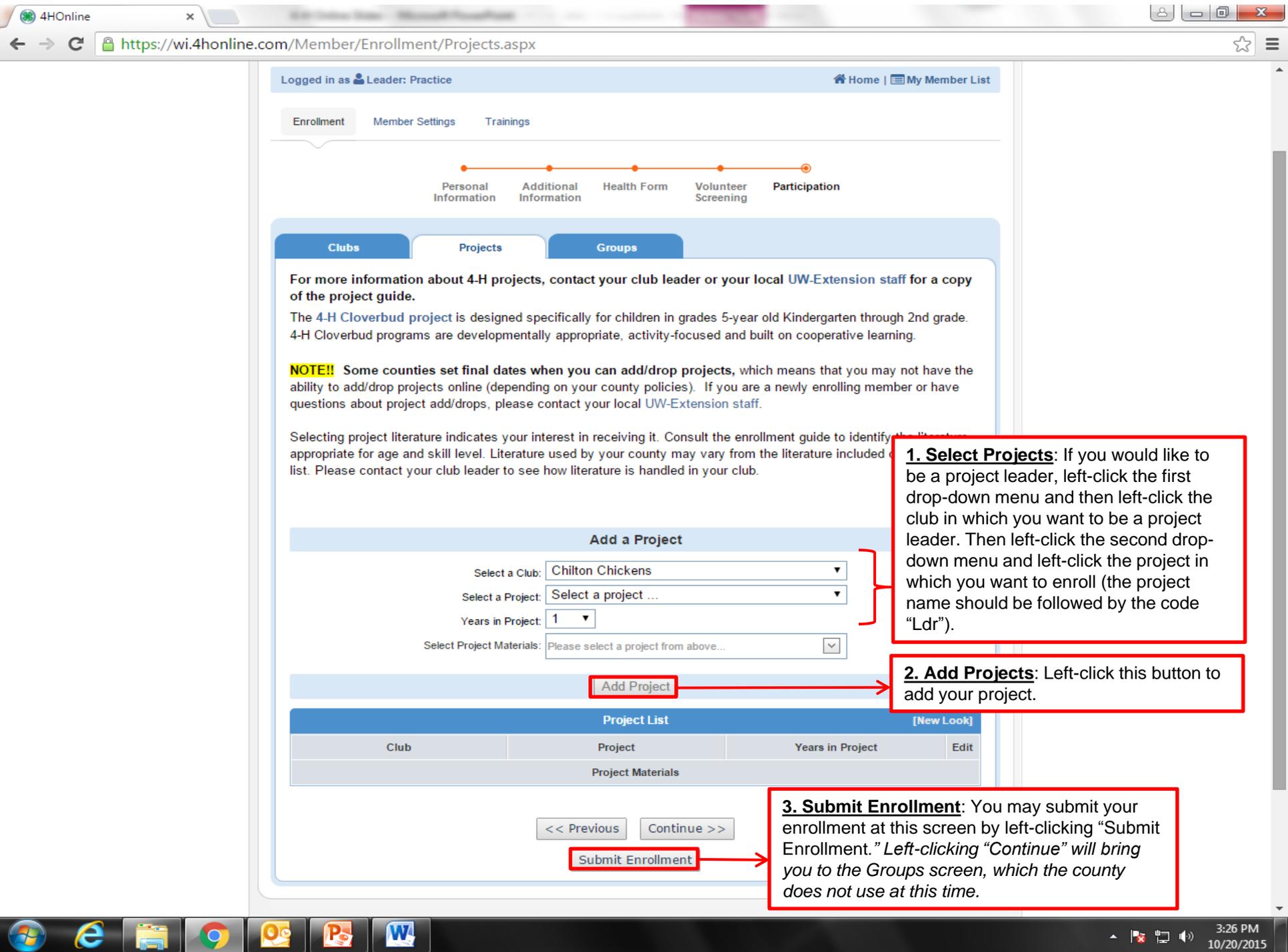
1. Club Status:

To add clubs, left-click the drop-down menu to present your options. Then left-click the "Add Club" button.

2. Primary Club Status:

If you have added multiple clubs, you must select one as your "Primary" club. Left click the circular button next to the club you would like to have as your "Primary" club.

3. Continue: Once you are satisfied with your club selection, left-click "Continue >>"



Clubs Projects Groups

For more information about 4-H projects, contact your club leader or your local UW-Extension staff for a copy of the project guide.

The 4-H Cloverbud project is designed specifically for children in grades 5-year old Kindergarten through 2nd grade. 4-H Cloverbud programs are developmentally appropriate, activity-focused and built on cooperative learning.

NOTE!! Some counties set final dates when you can add/drop projects, which means that you may not have the ability to add/drop projects online (depending on your county policies). If you are a newly enrolling member or have questions about project add/drops, please contact your local UW-Extension staff.

Selecting project literature indicates your interest in receiving it. Consult the enrollment guide to identify the literature appropriate for age and skill level. Literature used by your county may vary from the literature included on the list. Please contact your club leader to see how literature is handled in your club.

Add a Project

Select a Club: Chilton Chickens

Select a Project: Select a project ...

Years in Project: 1

Select Project Materials: Please select a project from above...

1. Select Projects: If you would like to be a project leader, left-click the first drop-down menu and then left-click the club in which you want to be a project leader. Then left-click the second drop-down menu and left-click the project in which you want to enroll (the project name should be followed by the code "Ldr").

Add Project

2. Add Projects: Left-click this button to add your project.

Club	Project	Years in Project	Edit
Project Materials			

<< Previous Continue >>

Submit Enrollment

3. Submit Enrollment: You may submit your enrollment at this screen by left-clicking "Submit Enrollment." Left-clicking "Continue" will bring you to the Groups screen, which the county does not use at this time.