

Lucas County 4-H SPIN Club Details



lucas.osu.edu/SPIN

Contact Information

Leader email

Assistant email

Main Topic/ Club
Name

Schedule of Sessions
(weekly? monthly?)

Amount of Time
needed for sessions

Start and End Time of
Sessions

Max Number of Youth

Age of Youth

Session Planning- List the topics and/or activities for each session (Optional)

Session 1

Session 2

Session 3

Session 4

Session 5

Culminating Project



THE OHIO STATE UNIVERSITY

COLLEGE OF FOOD, AGRICULTURAL,
AND ENVIRONMENTAL SCIENCES

4-H Special Interest (SPIN) Club Leader Job Description

Purpose: To help youth gain mastery of a specific topic or skill through a 4-H special interest club

Success Criteria: Youth, ages 8 to 18, will join the special interest (SPIN) club and participate in a series of hands-on learning experiences to gain new knowledge and skills. At the end of the experience, youth should be able to show that they have mastered the skills and evaluate what they have learned. Through these learning experiences youth will have opportunities to develop a sense of belonging, independence, and generosity through working successfully with a caring adult, practicing decision making and leadership, and giving back to the community through community service.

Time Required: Time for planning, teaching youth, reflecting on what worked well or areas where improvement is needed, and celebrating and recognizing learning. The SPIN Club must meet a minimum of six (6) sessions.

Responsibilities:

- Plan an overview of the skills to be taught
- Direct and guide youth as needed to help youth learn the skills necessary to achieve mastery of the topic
- Provide a sense of belonging to the youth by creating a welcoming feeling at each session
- Allow for independence and give youth opportunities for leadership roles in the club
- Promote a feeling of generosity by demonstrating appropriate behavior towards others
- Along with the youth, plan and promote an event to showcase the skills and knowledge learned through participating in the special interest club
- Promote additional 4-H experiences that are available to 4-H SPIN club members
- Complete an evaluation form for feedback
- Keep youth safe and develop a risk management plan for activities, if appropriate
- Acquire medical/accident insurance for group if not provided by county



THE OHIO STATE UNIVERSITY

COLLEGE OF FOOD, AGRICULTURAL,
AND ENVIRONMENTAL SCIENCES



lucas.osu.edu

CFAES provides research and related educational programs to clientele on a nondiscriminatory basis. For more information: go.osu.edu/cfaesdiversity.

Requirements:

- Fill out required volunteer application (includes application, references, BCI/FBI Background Check)
- Attend volunteer training as arranged (web based, CD ROM)
- Commit to meeting at least six sessions with the youth
- Recruit at least one additional volunteer to help with the group so that one adult is never alone with youth. Practice “two-deep leadership.”

Target Dates:

Special Interest clubs must meet a minimum of six times or more - duration of clubs depends on the skill or topic being taught

Resources Available:

Volunteer orientation and training
Extension Educator, 4-H Youth Development
4-H project manuals (if applicable)

For Questions Contact: The Ohio State University Extension, Lucas County
1 Government Center, Suite 550 Toledo OH, 43604
419-213-2016
lawrence.638@osu.edu

(Volunteer Signature)

(Date)

(Extension Staff Signature)

(Date)



Meeting Structure

1. Meeting #1
 - Teach 4-H Pledge
 - Do Pledge of Allegiance and 4-H Pledge
 - Introductions
 - Create phone tree in case of meeting changes
 - Plan for the 6 sessions
 - Form collection for those not turned in
 - Discuss behavior guidelines/risk management
 - Discuss leadership opportunities for members
 - Discuss/learn about topic
 - Do activity
2. Meeting #2
 - Do Pledge of Allegiance and 4-H Pledge
 - Allow for leadership opportunities for members
 - Review topic learning
 - Do activity
3. Meeting #3
 - Do Pledge of Allegiance and 4-H Pledge
 - Allow for leadership opportunities for members
 - Review topic learning
 - Do activity
 - Begin discussion of culminating event
4. Meeting #4
 - Do Pledge of Allegiance and 4-H Pledge
 - Allow for leadership opportunities for members
 - Review topic learning
 - Do activity
 - Discuss culminating event
5. Meeting #5
 - Do Pledge of Allegiance and 4-H Pledge
 - Allow for leadership opportunities for members
 - Review topic learning
 - Do activity
 - Remind youth of culminating event
 - Evaluation of SPIN Club – discussion of future SPIN Clubs or continued activities
6. Meeting #6
 - Culminating event



PLEDGE TO THE AMERICAN FLAG

I pledge allegiance
to the United States of America
and to the Republic for which it stands,
one nation under God, indivisible,
with liberty and justice for all.

4-H PLEDGE

I pledge
MY HEAD to clearer thinking
MY HEART to greater loyalty
MY HANDS to larger service, and
MY HEALTH to better living for my Club,
my Community, my Country, and my World.

Members raise their right hand to their forehead when they say,
“**my head to clearer thinking**”;
they lower their hand to their heart as they say,
“**my heart to greater loyalty**”;
they extend their hands, palms upward, as they recite
“**my hands to larger service**”;
and at the line,
“**my health to better living**”,
they stand at attention with their hands at their sides and remain in that
position until the close of the pledge.

4-H MOTTO

“To Make the Best Better”





Ohio 4-H SPIN Club Enrollment Form

4-H SPIN Club _____

 Check here if this is your Primary Club

Years in 4-H (Including this year) _____

E-mail Address _____

Name (please print) _____
First Middle Initial LastMailing Address _____ County of Residence _____
Street City ZipPrimary Phone _____ - _____ - _____ Correspondence Preference E-mail Mail T-Shirt Size _____ Youth AdultBirth Date ____ / ____ / ____ 4-H Age (age as of Jan. 1) _____ Gender Male Female Cell Phone _____ - _____ - _____ Check here to receive text alerts to your mobile device. Name of Mobile Service Provider _____

(There is no fee for this service. However, standard text message rates may apply. Please contact your mobile service provider for more details.)

*All 4-H mailings are directed to the primary parent/legal guardian listed below. Additional mailings may be directed to other parental/legal guardian at different addresses if indicated below.*Primary Parent/Guardian _____ Parent/Guardian #2 _____
First Last First Last

Address (if different) _____ Address (if different) _____

City _____ Zip _____ City _____ Zip _____

Cell _____ - _____ - _____ Work _____ - _____ - _____ Cell _____ - _____ - _____ Work _____ - _____ - _____

E-mail _____ E-mail _____

Receive 4-H mailings via E-mail Mail No Mailings

Occupation _____ Occupation _____

Relationship to 4-Her _____ Relationship to 4-Her _____

 Check here to list this parent/guardian as emergency contact Check here to list this parent/guardian as emergency contactEthnicity (check one) Hispanic Not HispanicRace (check all that apply) White Black American Indian/Alaskan Native Hawaiian/Pacific Islander AsianResidence (check one) Farm Town/Rural Town Suburb City
(Less than 10,000) (10,000 to 50,000) (More than 50,000) (More than 50,000) I have a parent serving in the Military I have a sibling serving in the MilitaryBranch of Service Air Force Army Coast Guard Marines NavyBranch Component Active Duty National Guard Reserves

School District _____ School Name _____ Grade _____

Health Considerations/Notes (i.e. food allergy, diabetes, etc....) _____

 I have read, understand, and agree to abide by the **OHIO 4-H CODE OF CONDUCT** on the back of this form._____
4-H Participant Signature_____
Date_____
4-H Volunteer/Leader Signature_____
Date

ACKNOWLEDGEMENT OF RESPONSIBILITY AND RELEASE

I understand and acknowledge that there are certain hazards and risks associated with my child's participation in 4-H educational activities. I understand and accept such risks, and thus waive all claims, demands and causes of action against the State of Ohio, The Ohio State University, the County and their respective trustees, members, officers, employees, agents and volunteers acting on their behalf. I understand that I am solely responsible for any costs arising out of any injury or property damage sustained through my child's participation in 4-H educational programs.

I have had sufficient time to review and seek explanation of the provisions contained above, have carefully read them, understand them fully, and agree to be bound by them. After careful deliberation, I voluntarily give my consent to my child's participation and agree to the terms contained in this Acknowledgement of Responsibility and Release.

I, (printed name) _____, am the parent or legal guardian of the 4-H participant. I have read and I understand the provisions of this document, I consent to the participant taking part in the activities described above, and I fully enter into and agree to the above Acknowledgement of Responsibility and Release.

PERMISSION TO USE CHILD'S PHOTOGRAPHIC FORM FOR PROMOTION

Ohio State University Extension would like to share the positive results of youth participation in Extension and 4-H Youth Development events. However, in some cases, parents or guardians may prefer not to permit such publicity.

(Please select one) I GIVE I DO NOT GIVE the Ohio State University permission to publish in print, electronic, or video formats the likeness or image of my child. I release all claims against the University with respect to copyright ownership and publication including any claim for compensation related to use of the materials. If this section is not completed, publicity about this child's participation will not be used by Ohio State University Extension.

OHIO 4-H CODE OF CONDUCT

4-H members, parents, and other adults participating in 4-H activities will:

1. Adhere to program rules, curfews, dress codes, policies, and rules of the facility being used.
2. Conduct themselves in a courteous, respectful manner, use appropriate language, exhibit good sportsmanship, and provide positive role models.
3. Abstain from illegal behaviors, use of alcohol, illegal or illicit drugs, and tobacco during 4-H events and activities.
4. Fully participate in scheduled activities.
5. Respect other's property and privacy rights.
6. Abstain from child abuse (physical and/or verbal) and harassment.
7. Accept personal responsibility for behavior including any financial damage.
8. Be responsible for any financial damage caused by inappropriate behavior.
9. Adhere to rules of safety.
10. I will uphold and support the responsible and lawful use of social media. In so doing, I will not create or post social media content that is abusive, threatening, defamatory, obscene, harassing, or creates a hostile environment.

Consequences for violating any part of this code of conduct may include, but are not limited to: removal from participation in the event in which the code of conduct has been violated (at the individual's expense); sanctions on participating in future 4-H events; forfeiture of financial support for the event; removal from offices held, etc.

Behavior outside of 4-H activities can affect "member in good standing" or "volunteer in good standing" status.

It is the responsibility of all program participants to reinforce the code of conduct and intervene when necessary to enforce the rules.

I have read, understood and thus agree to the above ACKNOWLEDGEMENT OF RESPONSIBILITY AND RELEASE, PERMISSION TO USE CHILD'S PHOTOGRAPHIC FORM FOR PROMOTION, and 4-H CODE OF CONDUCT mentioned above on this _____ DAY OF, _____ 20_____.

I hereby give permission for (printed name of 4-H participant) _____ to participate in organized events and activities offered by Ohio 4-H Youth Development Program for the current 4-H enrollment year. It is my understanding that my child will learn, understand and follow established guidelines for safety in the activities in which he/she participates. Further, I understand and agree that my child's 4-H enrollment information may be shared with organizations providing oversight of county and independent fairs.

Printed Name (4-H Participant)

Signature (4-H Participant)

Printed Name (Parent/Legal Guardian)

Signature (Parent/Legal Guardian)

CFAES provides research and related educational programs to clients on a nondiscriminatory basis. For more information:
<http://go.osu.edu/cfaesdiversity>.