

MEDICAL AUTHORIZATION FORM

Washington State FFA Exhibition

Each student attending the Exhibition must have a completed Medical Authorization Form on file at the Fair Office.

Name _____ Birth date _____

Complete Home Address _____

Home Phone Number _____ Parent's Work Number _____

Chapter _____ Advisor _____

Name of Insurance Company _____ Policy Number _____

Name of Family Physician _____ Phone Number _____

Please complete the blanks below and submit other information you feel is applicable.

Date of last medical physical examination _____ Date last tetanus shot _____

Drug / medication or other allergies _____

Please note if there is a history of:

Heart Condition ____ Diabetes ____ Asthma ____ Epilepsy ____ Rheumatic Fever ____ Allergy ____

List any physical restrictions _____

Other conditions (serious illnesses or injuries) _____

List all medications taken regularly _____

I understand that should a health problem arise, I will be notified, but if I cannot be reached by telephone, such medical treatment as deemed necessary by competent medical personnel will be rendered. I give my permission for taking any medical steps necessary to preserve the life and health of my child in my absence. It is our understanding that Good Samaritan Hospital of Puyallup will administer life-saving measures only until contact has been made with parents/legal guardians. The following named person has my permission to sign any forms necessary in my absence.

Advisor's Name

Parent/Guardian Signature _____ Date _____

Al Schwider, 21420 204th Avenue SE, Maple Valley WA 98038
425-432-3455 al@thepinesfarm.com

A. Exhibitor Primary Information

PLEASE PRINT Last Name: _____
 First Name & Middle Initial: _____

Birth date ____/____/____ M F Chapter _____
 Month Day Year Circle One

Mailing Address _____ City _____ ZIP _____

Emergency Phone: Daytime - (____) _____ Evening - (____) _____

Parent/Guardian's Name: _____ Home Phone No. (____) _____
 Last First

Chaperone's Name _____ M F
 Last First Relationship to Exhibitor Circle One

Exhibitor will be staying in dorm staying in WWF camper-ville staying in _____ Motel Other _____
 Chaperone will be staying in dorm staying in WWF camper-ville staying in _____ Motel Other _____

By completing and signing this form, parent/guardian: gives permission for exhibitor herein named to participate at the State FFA Fair, to be chaperoned as listed, and for emergency medical treatment to be initiated in parent/guardian's absence.

Parent/Guardian Signature _____

B. Medical Information Circle condition below if "yes"

Allergies, Injuries, Illness, Regular Medications - List ↓

 History of: Heart Condition Asthma
 Epilepsy Diabetes Sleepwalking
 OTHER: _____

C. Activity Information Circle all that apply

ANIMALS I WILL EXHIBIT:	ACTIVITIES I WILL PARTICIPATE IN:
Beef Dairy Dairy Goat	Judging Contest(s) Public Presentations Ag Mechanics
Swine Sheep Other Goat	Round Robin Ag Science Forestry/ Natural Resources
Rabbit	Educational Materials Special Events Tractor Driving
Exotic Display	State FFA Leadership Contest

For State 4-H Fair Office Use Only

Dormitories are available to exhibitors/chaperones during participation in the State FFA Exhibition only. Chapter _____

D. Dorm and Pass Information Exhibitor Name: _____

Exhibitor has permission to stay in dormitory?	(\$4/night - \$2/night in overflow)	(Circle one)	No	Yes
Chaperone (one per exhibitor) in dormitory?	(\$8/night - \$4/night in overflow)	(Circle one)	No	Yes
Non-exhibitor/non-chaperone in dorm: (List below)	(\$25 per night, dorm or overflow)	(Circle one)	No	Yes

Name: _____ Relationship to exhibitor: _____

Passes Given:	In _____ Out _____	No. nights _____	Exhibitor (@ \$2 or \$4)	\$ _____
Exhibitor _____ Initials _____	In _____ Out _____	No. nights _____	Chaperone (@ \$8 or \$4)	\$ _____
Adult _____ Initials _____	In _____ Out _____	No. nights _____	Non-exhibitor (@ \$25)	\$ _____
<i>E.g. 1 6-day A, 3 1-day</i>	In _____ Out _____	Total no. _____	Shower Bands (@\$10)	\$ _____
List shower band users:	<i>List day only (15, not 9/15, e.g.)</i>	Ck. # _____	TOTAL COLLECTED	\$ _____

1. _____ Relationship to Exhibitor: _____

2. _____ Relationship to Exhibitor: _____

DORMITORY RULES

Washington State FFA Exhibition

Dormitory Information

- Dorm space is on a first come, first served basis. Space cannot be reserved in advance.
- Dormitory facilities will be available for FFA exhibitors beginning at 1 p.m. September 18. The facilities will close at 7 p.m. on September 27. The dormitory facilities are located at the south end of the fairgrounds on the second floor of the dog/cat barns. Enter at the Green Gate.
- The use of dormitory facilities is a privilege, not a right. The dormitory supervisor has the authority to request unruly or troublesome occupants to leave the dormitory for the duration of the Fair. If suspended from the dormitory, the Ag. Teacher and/or parent will be notified. Complete rules are on the back of the Application.
- For the safety of all, DO NOT USE anything that could cause a fire in the dorms. Fire regulations prohibit cooking, use of electrical appliances (other than hair dryers, curling irons and razors) and smoking in the dormitories.
- Remember, you are sharing living facilities with your fellow exhibitors. Be courteous and respect the rights of others. Quiet hours are between 10 p.m. and 6 a.m. Overhead lights will be out at 11 p.m. Dormitory doors will be locked at 11 p.m. Ag Teachers and show management must be given the names of those requesting admittance to the dormitory after 11 p.m.
- Help keep the dorms neat and pleasant by keeping bunks orderly and clean at all times. Individuals will be assigned clean-up duty on a daily basis.

What to Bring

- A sleeping bag, pillow, towels and personal care items, including soap.
- Clothes, including your FFA jacket, as well as a sweatshirt or coat in case it's chilly at night.
- Snacks and drinks that do not have to be refrigerated, and a bag for garbage.
- Remember, it is unwise to bring anything of great personal or monetary value. Neither the Fair nor the FFA are responsible for lost or stolen items.

Dormitory Check-in Procedures

- Fill out Dormitory Application and Medical Information Form and bring to the Fair.
- Park in the lot closest to dormitories. Enter at the Green Gate.
- Take personal belongings directly to dorms. You may use the elevator when carrying in your belongings. Check in with dorm supervisor who will direct you to a bunk. If the dorms are filled, you will be able to leave your belongings in the dorm until the overflow dorm is opened for use.
- Have dorm permission slip completed by dorm supervisor. Bring completed forms to pass/dorm office for validation and payment. Your space is not confirmed until payment has been made.

Dormitory Rules

- Lights out is at 11 p.m. and doors are locked at 11 p.m. Anyone requesting admittance after 11 p.m. will be reported to the FFA Exhibition Manager.
- Showers are allowed from 6 a.m. - 11 p.m. Shower facilities are available for resident of overflow dorm in the main dormitories between 6 a.m. and 10 p.m. Exhibitors have priority.
- Elevator may be used by dorm residents for carrying belongings to and from the dorms and in case of physical limitations. Please use stairs at all other times.
- Enter and exit through designated dorm doors only. Additional doors in each dorm are restricted to emergency use only.
- No loitering on balcony or hanging over railing.
- Keep your bunk and immediate space clean and tidy. Clean up behind yourself in bathrooms.
- Refrigerator space is reserved for use by dorm supervisors and kitchen activity participants.
- Dorm supervisors should be informed of any bunk changes because of to need to locate occupants in an emergency.
- Please roll up sleeping gear and prepare luggage for leaving on the morning after your last night in the dorm. This will indicate to incoming occupants that your bunk is available.

WASHINGTON STATE FFA EXHIBITION CODE OF CONDUCT

As a participant in the Washington State FFA Exhibition, you have earned the opportunity of representing the FFA program to the public. Therefore, you are expected to conduct yourself in a manner that reflects well on your state, county, and club, as well as yourself.

1. Participants will demonstrate respect and courtesy to each other, all adults, their animals, and the fair-going public. Please be considerate of others.
2. Dress appropriately for the occasion. Wear required attire while in classes and while on duty. Exhibitors are encouraged to interact with the public. The fair is an educational opportunity.....for both the exhibitor and the public.
3. Language must be controlled and appropriate. Swearing is not considered appropriate.
4. Possession or the use of alcohol, drugs, or any controlled substance (other than prescribed medicine) is strictly PROHIBITED!..FFA members may not use tobacco products.
5. Avoid tampering or damaging fairgrounds buildings, other displays, equipment, etc. that may cause damage to the public, members, or leaders.
6. Conduct unbecoming to the FFA is prohibited. Unbecoming conduct includes potentially dangerous actions or actions that present a safety concern or risk, such as riding in or on livestock trucks or trailers, "horseplay", or any activity whose sole purpose is to humiliate or potentially injure others.
7. FFA members must follow the FFA Code of Ethics as spelled out in the official FFA manual.
8. Students are prohibited from sleeping and/or lounging in or about stall areas.
9. Disciplinary Action: Students out of compliance with the rules of the exhibition will be first dealt with by the advisor or his/her designated parent or chaperone. If this action does not remedy the situation, then the responsible supervisory person shall deal with the issue. Any difficulty beyond this point shall be dealt with by a state staff person.

Exhibitors found in violation of rules or the FFA Code of Ethics may be penalized by:

1. Forfeiting of all premiums, prizes, ribbons, awards, and/or privileges as deemed appropriate to the circumstances.
2. Being eliminated from participation at future state fair activities.

I, _____, have read the Code of Conduct and agree to abide by its rules.
(Name of Exhibitor – please print)

I understand that infractions of this code may result in any or all of the penalties listed above.

Exhibitor Signature

Date

Work & Home Phone

I, _____, have read the Code of Conduct. I understand that I am responsible for my child or ward's
(Name of Parent/Guardian – please print)
behavior. I give my permission to the staff in charge to administer the code.

Parent/Guardian Signature

Date

Work & Home Phone