



CERTIFICATION OF MEDICAL/HEALTH FORM BEING CURRENT AND CORRECT

THIS FORM IS TO BE ATTACHED TO THE BACK OF A 2020-2021 LOUISIANA 4-H MEDICAL/HEALTH FORM. THE CERTIFICATE CANNOT BE SUBMITTED UNLESS A 20-21 MEDICAL/HEALTH FORM IS ON FILE WITH YOUR PARISH 4-H OFFICE.

The Louisiana 4-H Youth Development Program will allow a 4-H member/adult to complete one medical/health form per year as long as the form is certified by the parent/guardian (or adult) **E A C H T I M E** the form and its information is needed/used for a 4-H event, activity, or camp. If there are **ANY** changes to the medical condition (physical, mental, or emotional) or **ANY** changes to medicine being used by the form holder, a new form must be completed. **DO NOT UPDATE OR EDIT ANY INFORMATION ON THE CURRENT FORM!**

I, the undersigned parent/guardian of the youth listed on this form (or the adult listed on form) certify that all information on the Louisiana 4-H Medical/Health Form is current and correct. As the undersigned, I provide the Louisiana 4-H Program and/or an agent, acting on their behalf, to treat and care based on the information I have certified as current and correct. I certify that the youth is able to safely participate in this activity and that I have disclosed any physical, mental, emotional, and social health issues that might impact his/her participation.

EVENT FORM IS BEING USED FOR: _____

PRINTED NAME OF PARTICIPANT: _____

PRINTED NAME OF PARENT/GUARDIAN: _____

SIGNATURE OF PARENT/GUARDIAN: _____

DATE: _____

Instructions to LCES Agents and Support Staff:

1. If any change occurs a **NEW** Medical/Health Form must be completed. **NO EDITS OR CHANGES ARE ALLOWED TO A MEDICAL/HEALTH FORM. All medical forms (current and non-current) must be retained in the parish office.**
2. As Certificates of Current and Correct Information forms are received, they must be secured to the back of the medical/health form.
3. For in-parish events, the original forms may be taken to the event as needed. For regional and/or state events, it is advised the parish office make the necessary copy of the medical/health form and the certificate of current and correct information and send in a closed envelope with the agent and/or supervising chaperone.
4. All medical/health forms when not in use for an event, activity, or trip must reside in the parish office in a secure location and inaccessible to the general public.
5. Forms are NOT to be accepted via email, fax, or other electronically transmitted format. The Medical/Health and/or the Certification of Medical/Health form cannot be saved on any electronic device owned and/or managed by the LSU AgCenter.