Hello:                                                                                                        February 5, 2020

It’s that time of year again, and our State 4-H Horse Roundup is just around the corner. The 2020 State 4-H Horse Roundup will be held on April 25th and 26th this year. The Hippology and Horse Bowl contests will be held on Saturday, April 25th, at Wheaton College in Norton. The judging phase of Hippology is going to be held at Wheaton College with the use of DVD’s. The Horse Judging contest will be held on Sunday, April 26th at Hillside Meadows Equestrian Center in Grafton, MA.

All contests include a junior and senior division. Senior contests will be used to determine members of our 2020 state teams that will participate at the National 4-H Horse Round Up in Louisville, Kentucky in November.

**Counties may send up to 6 individual Senior and Junior contestants in all three contests.**

Rules for the 2020 State 4-H Horse Roundup (Hippology, Horse Bowl and Horse Judging) can be found on the MA 4-H website. Please pass along these rules to your county coaches.

A tentative itinerary for both contest dates is being sent with this letter, please note things may change and we will update that information as necessary.

**COUNTY ENTRIES**

Each county is responsible for determining how their team members are selected. Youth may compete in one or all three contests offered as part of “State Roundup.”

Each county may submit a team of up to 4 individuals plus 2 alternates per contest for Juniors and 6 individuals for the Senior division. The Junior alternates will be used to fill in other county teams and make a blended team. Junior alternates that attend State Roundup, and are not competing, may still participate in both the Hippology and Horse Judging contests, however, they will not be eligible for placing (except in the case of junior alternates selected to help fill another county team or on a blended team). This is a valuable opportunity for these youth to gain more experience, and they should be encouraged to take advantage of this opportunity.

Alternates will not be allowed to participate in the Horse Bowl contest, with the exception of the Junior Horse Bowl alternates, who may be used to form complete teams for counties that do not have 4 delegates, in addition to potentially filling in for their own team. A random draw will be done to select alternates for blended teams prior to competition if necessary, and those alternates that are chosen will be notified. Please note that it is NOT GUARANTEED that any junior alternates will be able to compete.
Entries for the State Roundup (Hippology, Horse Bowl and Horse Judging) are due electronically by April 1st, 2020. Entry forms have been emailed to each county/regional office and to key horse volunteers. Please send entries electronically to Carrie Chickering-Sears at ccsears@umext.umass.edu

The following information must be mailed and postmarked by April 1st, 2020

1) Paperwork for any 4-H member that needs an accommodation to participate
2) Entry fee of $20 per participant per day. This fee includes a snack, lunch and contest supplies. *see below for payment specifics
3) Special request lunch form, please note this is only for those who have food allergies or dietary restrictions
4) Health Form on all contestants

*Please note: each county Horse Advisory Council (or county representative if no Advisory Council) is responsible for sending in money for their county State Roundup participants. Please send individual checks to your designated county representative, contact them to ask how they want checks written out. Please see below for a list of county contacts:

For example, for Worcester County, they would like checks made out to the “Worcester County 4-H Horse Council” and sent to Rena (address below)

<table>
<thead>
<tr>
<th>County</th>
<th>Contact</th>
<th>Email Address</th>
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<tbody>
<tr>
<td>Barnstable</td>
<td>Judy Vollmer, Barnstable Office, Box 367, Barnstable, MA 02630</td>
<td><a href="mailto:jvollmer@barnstablecounty.org">jvollmer@barnstablecounty.org</a></td>
</tr>
<tr>
<td>Berkshire</td>
<td>Mary Brazie, 172 Egremont Plain Rd. Egremont, MA 01230</td>
<td><a href="mailto:arabpinto13@yahoo.com">arabpinto13@yahoo.com</a></td>
</tr>
<tr>
<td>Bristol</td>
<td>Jay Field, 4-H Office, 400 Main St., Walpole, MA 02081</td>
<td><a href="mailto:jfield@umext.umass.edu">jfield@umext.umass.edu</a></td>
</tr>
<tr>
<td>Essex</td>
<td>Nancy McCarthy, 4 First St. #7101, Salem, MA 01970</td>
<td><a href="mailto:nmccarthy@umext.umass.edu">nmccarthy@umext.umass.edu</a></td>
</tr>
<tr>
<td>Franklin</td>
<td>Ashlea Rawls, 12 Federal Street, Millers Falls, MA 01349-1244</td>
<td><a href="mailto:rawls.ashlea@icloud.com">rawls.ashlea@icloud.com</a></td>
</tr>
<tr>
<td>Hampden</td>
<td>Fran Schaeffer, 81 S. Maple Street, Westfield, MA 01085-4355</td>
<td><a href="mailto:witchfarm@aol.com">witchfarm@aol.com</a></td>
</tr>
<tr>
<td>Hampshire</td>
<td>Carolyn Ritter, 44 Johnson Rd, Belchertown, MA 01007</td>
<td><a href="mailto:cmritter621@yahoo.com">cmritter621@yahoo.com</a></td>
</tr>
<tr>
<td>Middlesex</td>
<td>Erica Desfosses, 22 Tanager Way, Manchester, NH 03053</td>
<td><a href="mailto:regalriders08@gmail.com">regalriders08@gmail.com</a></td>
</tr>
<tr>
<td>Norfolk</td>
<td>Jay Field, 4-H Office, 400 Main St., Walpole, MA 02081</td>
<td><a href="mailto:jfield@umext.umass.edu">jfield@umext.umass.edu</a></td>
</tr>
<tr>
<td>Plymouth</td>
<td>Molly Vollmer, Plymouth Office, 44 Obery St, Plymouth, MA 02360</td>
<td><a href="mailto:mvollmer@umext.umass.edu">mvollmer@umext.umass.edu</a></td>
</tr>
<tr>
<td>Worcester</td>
<td>Rena Levitre-Falconi, 34 Huckleberry Rd, Hopkinton, MA 01748</td>
<td><a href="mailto:rena@aalanco.com">rena@aalanco.com</a></td>
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Registrations not postmarked by April 1st, 2020 will be charged a $25 late fee, and no entries will be accepted for any reason after April 10th, 2020 so please plan accordingly!

Please send all information and ONE CHECK (made out to 4-H Horse Program of MA) per county including hard copies to:

Carrie Chickering-Sears
101 University Drive, Suite A-4
Amherst, MA 01002
ADDITIONAL INFORMATION

1. Please note on the entry form if an accommodation is needed by a delegate to participate in a contest due to a documented disability and make sure a copy of the accommodation letter is submitted for the contest.

2. Please make sure your payments and paperwork get in on time. If a county has not submitted all necessary paperwork, their entries will be charged a late fee and not processed until everything is complete.

3. A raffle will be held to help raise money for the teams going to the National contest. Each county is asked to bring in a themed basket that can be raffled off. Baskets do not have to be horse related and additional raffle items are welcome.

4. A food booth will be set up for those not competing to purchase food. All profits will be used to help the 2020 teams participate at the National contest.

5. Once contestants have signed in with their coaches, they are not allowed to leave the contest site until the end of the contest unless they are accompanied by an adult.

6. Cell phones or any type of electronic device will not be allowed in any of the contest rooms. Any contestant found having a cell phone, ipod, tablet, Fitbit, etc. during the contest will be disqualified. Electronics should be left in a vehicle, or checked in at the registration table on the morning of the event.

7. Contestants and coaches are encouraged to use the resources on the Massachusetts 4-H website at http://mass4h.org/index.php/programs/animal-science/horses when preparing for the state contest.

8. For Horse Bowl and Hippology, teams may wear clothing that identifies them as being from their respective county. Clothing that identifies who a participant is or where a participant is from (club name, school, breed association, etc) is NOT ALLOWED during oral reasons in the judging competition so please plan ahead.

9. Counties must provide adult volunteers to help with Saturday contests only. Volunteer roles may include correcting tests, monitoring rooms, guiding contestants to their correct location, etc. Volunteers names must be submitted on the counties entry form, the number of volunteers required is based on the number of participants each county is sending:

   - 4-6 participants: 1 volunteer
   - 6-10 participants: 2 volunteers
   - 11 or more: 3 volunteers

10. Counties must submit 30 well vetted and sourced Junior horse bowl questions using the template provided. Please submit these questions electronically with your entry spreadsheet. Remember we are using these questions in the competition and they should not be pulled from your practice questions or used during any practice.
For 2020 state team selections are as follows:

**Communication Team** – the winners of the public speaking, team demonstration and individual demonstration contests at the State Visual Presentation Day will make up the communication team.

**Hippology, Horsebowl, and Horse Judging Teams** – the top 4* placing seniors will be picked for the “A” team, and the next 4 will be picked for the “B” team. During the training with their coaches, those demonstrating top performance, full participation and strong work ethic will be selected for Nationals.

*Some contestants may place in the top 4 or 8 in more than one event. If this is the case, contestants must choose which team they want to be on. Lower placing contestants will then be moved up the list to fill in the vacant spot.

**Contestants must make a decision by May 4, 2020 and contact me via email with your team preference. ccsears@umext.umass.edu**

If you have any questions regarding the 2020 State 4-H Horse Roundup, please feel free to contact me at ccsears@umext.umass.edu or 413-545-5302

Sincerely,

*Carr*ie C*hickering-Se*ars

Carrie Chickering-Sears  
MA State 4-H Animal Specialist  
University of Massachusetts Amherst  
101 University Drive, Suite A-4  
Amherst, MA 01002  
(413) 545-5302
Roundup Itinerary

Saturday, April 25, 2020  Horse Bowl and Hippology at Wheaton College

8:15-8:45 am        Hippology Teams Check In- Wheaton College – Mars Science
8:45 am            Welcome
9:00 am             Exam phase begins
9:45 am             Station, Slides, Judging
11:30 am            Begin Lunch
12:15 – 12:30 pm    Horse Bowl Teams Check In
12:45 pm            Welcome – Split into Groups
1:00 pm             Junior & Senior Horse Bowl Contest
*3:45 pm            Raffle
*4:15 pm            Awards
*approximate times, exact times will be announced

Address for Wheaton College
26 E. Main St.
Norton, MA 02766

We will be meeting at the MARS Science Center in the Diana Davis Spencer Café.
Parking in Lots 4, 7 & 8 Please refer to Wheaton College Map
Sunday, April 26, 2020 Horse Judging at Hillside Meadows
Hillside Meadows Equestrian Center

8:45 – 9:30 am  Judging Teams Check In
9:30 am             Judging Contest Begins
12:00 noon                       Lunch and Prepare for Reasons
1:00 pm          Oral Reasons Begin
3:00 pm   Raffle Drawing
3:30 pm   Judging Contest Awards

The address for Hillside Meadows is **111 George Hill Rd Grafton, MA 01519**
***Please check for #111 on the mailbox so you don’t disturb the neighbors!***

Please remember that this is a working farm and busy boarding operation. We will have a designated area for 4-H. There will be no wandering on the property, petting of horses or disturbing the workings of this facility by youth, volunteers, parents or siblings. Please plan accordingly.

Possible Judging classes

Sunday, April 26th- Horse Judging

Stock Horse in Hand-QH, Paint, or mixed
Hunter or Warmblood in Hand
Hunter Under Saddle
Western Pleasure
Roundup Special Request Lunch Form

County Name: __________________________________

Please note that Saturday’s lunch will be subs from Subway and Sunday we will be serving pizza. If you have a youth with an allergy or dietary restriction that can’t eat the provided meal, we are happy to offer a salad in its place. Please fill out the table below and check each day the youth is attending where they need an alternative lunch. Because we are providing these lunches at an added expense, any youth requesting a salad on this form will be required to take the salad lunch.

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<tr>
<th>Name</th>
<th>Allergy or Restriction? (If allergy please state what it is)</th>
<th>Saturday</th>
<th>Sunday</th>
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Checklist for Roundup Entries

*Please remember the excel spreadsheet is due electronically by April 1, 2020, all paperwork must be postmarked by April 1, 2020. Those that are not will incur a $25 late fee, and no entries will be taken after April 10, 2020.

*All paperwork must be submitted in ONE packet with ONE check, no exceptions. Any county sending paperwork separately will not have their entry accepted until it is sent in one packet.

*Adult Volunteer names must be provided on the entry spreadsheet, the number of volunteers needed depends on the amount of entries you are sending. This is for Saturday April 25, 2020.

*Counties are required to submit 30 well vetted and sourced junior level horse bowl questions as part of their entry. Please use the template provided and submit them electronically with the entry spreadsheet.

Please make sure you have the following paperwork in your packet:

________ Excel Entry form w/Adult volunteer names e-mailed to Carrie by April 1, 2020, send hard copy as well.

________ ONE check made payable to 4-H Horse Program of MA (cost is $20 per entry/day)

________ Paperwork for Youth requiring Accommodations if applicable

________ Special Request Lunch form if needed

________ 30 Junior level well vetted and sourced Horse Bowl questions submitted electronically using template with excel spreadsheet entries.

________ Health Forms to be submitted.
Massachusetts 4-H Horse Program

4-H Youth Development

2019-2020 MEMBER HEALTH INFORMATION FORM

COMPLETION OF THIS TWO PAGE FORM IS REQUIRED

Name of Youth Member

County of Enrollment

Date of Birth

1. Please check the following conditions that apply to your child:
   - ADD/ADHD
   - Anxiety
   - Appendicitis
   - Asthma
   - Bronchitis
   - Convulsions/seizures
   - Fainting Spells
   - Heart or cardiovascular problems/disease
   - Migraine headaches

List other conditions:

2. Please list all medications taken within the last six months:

<table>
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<tr>
<th>Name of Medication</th>
<th>Purpose</th>
<th>Dosage</th>
<th>Times Taken</th>
<th>Can the child self-medicate?</th>
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3. Please identify allergies:

   - Does the youth carry an Epipen?
   - Drug reactions/Medications
   - Foods; be specific i.e. peanuts, dairy, gluten
   - Insect bites/Stings
   - Other

4. Please check over-the-counter medications that can be administered by 4-H staff and volunteers:

   - Antacid
   - Benadryl
   - Cough Syrup
   - Decongestant
   - Dramamine
   - Hydrocortisone
   - Ibuprofen
   - Polysporin
   - Other:

5. Are there any operations or serious illnesses within the last year AND any complications that we should be aware of?

6. Provide any additional information not covered above that a physician, emergency personnel or staff would find helpful:

7. If you have any question about your child's health, please secure a complete health examination from a physician and provide a signed physician's statement permitting participation.
Massachusetts 4-H Horse Program

4-H Youth Development

2019-2020 MEMBER HEALTH INFORMATION FORM

This Medical Release Form is authorized for all 4-H Youth Development meetings & activities for the current 4-H year:

Name of Member

Name of 4-H Club(s)/Group(s)

While my child is attending or traveling to or from a 4-H function, I HEREBY AUTHORIZE THE ADULT 4-H VOLUNTEER LEADER OR 4-H STAFF MEMBER, or in his/her absence or disability, any adult accompanying or assisting him/her, TO CONSENT TO THE FOLLOWING MEDICAL TREATMENT FOR SAID MINOR:

- Any x-ray examination, anesthetic, medical or surgical diagnosis or treatment, and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and/or surgeon licensed under the provisions of the Medical Practices Act; or any x-ray examination, anesthetic, dental or surgical diagnosis or treatment, and hospital care to be rendered by a dentist licensed under the provisions of the Dental Practices Act.

- This authorization shall remain effective until my child completes his/her activities in this program unless sooner revoked in writing. I understand that as a parent/guardian, I will be responsible for the cost of any service or treatment provided not covered by the American Income Life Accident Policy purchased for enrolled 4-H members.

EMERGENCY CONTACT INFORMATION

Name ____________________________ Relationship to Youth Identified Above ____________________________

(_____) ____________________________ (_____) ____________________________
Home Phone (with area code) ____________________________ Cell Phone (with area code) ____________________________

Street Address ____________________________ City ____________________________ State ____________________________ Zip ____________________________

Person to Contact if Parent/Guardian Cannot Be Reached ____________________________ Cell Phone ____________________________ Relationship to Child ____________________________

Name of Child’s Physician (optional) ____________________________ Phone number ____________________________

AUTHORIZATION, CONSENT AND RELEASE

I hereby certify that my child is in good health and can participate in and travel to all functions of the 4-H Youth Development Program.

- I understand that it is my responsibility to keep the Health History Information form updated regarding my child/ward’s medical situation including pre-existing conditions, allergies, change in medications or medical status so that in case of a medical emergency appropriate medical assistance can be given, and may affect the youth’s regular participation in program activities.

- I understand that the volunteer leader(s) and 4-H staff understand that medical information is confidential and will release health information only to designated medical personnel in the event of an emergency, as authorized by my signature below.

- I understand that 4-H may require a doctor’s note if there are any questions about the ability of the member to participate safely in 4-H activities.

- I certify that I have accurately provided the required information, and signed the Permission & Liability Waiver form.

- In case of emergency, I give my consent for necessary examination and treatment as prescribed by the attending physician.

Signature of Custodial Parent(s)/Guardian ____________________________ Date ____________________________

5/2018

UMass Extension is a unit of the Center for Agriculture, Food & the Environment in the College of Natural Sciences. UMass Extension is an equal opportunity provider & employer. United States Department of Agriculture cooperating. Contact your local UMass Extension office for information on disability accommodations or the UMass Director if you have concerns related to discrimination, 413-545-4800 or refer to www.extension.umass.edu/disabilities.
Massachusetts 4-H Horse Program