

Hill County 4-H Enrollment Form

Club _____

Category (Circle One): M-Member (9 by end of 4-H yr) C-Clover (6-8 by end of 4-H yr)

Enrollment Type (Circle One): N-New Enrollment R-Re-Enrollment

Last Name: _____ First Name: _____ M.I. _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: () _____ School: _____

Gender: M F Birthday: ____ / ____ / ____ 4-H Age: ____ Grade: ____ Year In 4-H: ____

Ethnic (Circle One): White Black Am. Indian/Alaskan Asian Mixed

Residence (Circle One): Farm Rural Under 10,000 Urban 10,000-50,000

I would like the Extension Office to be aware of the following disabilities _____

Project Code	Project Name	Yr. In Proj	Project Literature Needed (title with corresponding #)	Literature Number

(More can be added on back)

PARENT/GUARDIAN INFORMATION

	MOM (legal guardian <u>Y</u> <u>N</u>)	DAD (legal guardian <u>Y</u> <u>N</u>)
NAME		
MAILING ADDRESS & ZIP		
HOME PHONE		
WORK PHONE		
OCCUPATION		

Email: _____

As parent/guardian, I give my permission to use my child's picture for 4-H promotion. (Circle One) Yes No

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

LEADER SIGNATURE: _____