REGISTRATION Worksheet for 2015 4-H YOUTH CONFERENCE, ROUND-UP, OR CSI: CROPS—Submit on-line at:
http://www.extension.iastate.edu/4h/iowa4hyouthconference
or return to: Registration Services, 1601 Golden Aspen Drive, Suite 110, Ames, IA 50010

ALL PARTICIPANTS:
Check one box (required)
Conference (see Box A)
Round-Up (see Box B)
CSI: Crops (see Box C)

PARTICIPANTS:
If applicable, mark squares below:
2014-15 State Council
2015-16 State Council
Chaperone for (select one):
_____ Conference
_____ Round-Up

A
CONFERENCE DELEGATES
Workshop (list preferences)
Tuesday 1st T-_____ 2nd T-_____ 3rd T-_____ Wednesday 1st W-_____ 2nd W-_____ 3rd W-_____ Thursday 1st R-_____ 2nd R-_____ 3rd R-_____ Community Service
List any conditions that would limit your participation in an indoor or outdoor activity:

B
ROUNDUP DELEGATE
Check species for which you were selected as a Delegate:
[ ] Beef [ ] Dairy [ ] Horse [ ] Sheep [ ] Swine

2015 Youth delegates were selected by an online application process.

C
CSI: CROPS DELEGATES
Delegates do not need to select any specific workshops. They will have the opportunity to rotate through all Crops opportunities.

First Name _________________________________________________
Last Name _________________________________________________
Address ____________________________________________________________________________________________
City __________________________________________________________ State __________________ Zip ___________________
4-H County _______________________________________________________

Phone (______)________________ Grade _________
Gender [ ] Male [ ] Female [ ] Other (list) ___________________

E-mail _____________________________________________

ROOMMATE PREFERENCE
Name __________________________________________
County ___________________________________________

SPECIAL NEEDS
[ ] Physical disability requiring special assistance. Please describe:
________________________________________________________________________________________________________
[ ] Alternative menu: _____ Vegetarian _____ Diabetic
_____ Food allergies (list) ____________________________________________________________________________

MAKE CHECKS PAYABLE TO COUNTY. Financial assistance is available. Ask your County Extension Office for the form and return it to the County Extension Office by
___________________________________________.  ❞ ❞ ❞ ❞ ❞

Conference, Round-Up, CSI: Crops fee $175.00
Late Fee, After June 1: Add $25.00 _________
Conference T-shirt Size: _____Sm _____Med _____Lge _____XL
_____XXL _____XXXL

Financial Aid: Subtract —___________
TOTAL ENCLOSED —___________
(Cancellations postmarked before June 10 receive half refund. No registrations or cancellation refund will be accepted after June 10, 2015.)

FOR COUNTY USE ONLY: COUNTY # _________ REGION __________ AREA __________