



4-H ENROLLMENT FORM

CLUB \_\_\_\_\_

SIOUX COUNTY

FOR OFFICE USE ONLY

COUNTY CODE: \_\_\_\_\_ CLUB CODE: \_\_\_\_\_ MEMBER CODE: \_\_\_\_\_

Circle one: Member General/Organizational Leader Project Leader  
New Enrollment Re-enrollment

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Middle Initial \_\_\_\_\_

Address: \_\_\_\_\_ School: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Social Security # \_\_\_\_\_

Grade (as of 9/15/current year) \_\_\_\_\_ Birthday: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Sex: M F  
(4th-12th grade are eligible)

Years in 4-H: \_\_\_\_\_ Parent (Guardian): \_\_\_\_\_

Home phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent Address (if different than member's): \_\_\_\_\_

Email address: \_\_\_\_\_

Other 4-H Club memberships: \_\_\_\_\_

Circle one: American Indian Asian Black White Hispanic  
Circle one: Farm Town (under 10,000 or open country)

Project (unit) name Project Code # Year(s) in project

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Parent Signature for photo release \_\_\_\_\_

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PARENT CODE # \_\_\_\_\_