

4-H Enrollment Form

Carroll County

2010-2011

Club: \_\_\_\_\_ Date: \_\_\_\_\_

Category (Circle One): **M**-Member **C**-Cloverbud/Mini 4H **G**-Organization Leader **A**-Activity Leader  
**R**-Resource Leader **S**-Special **P**-Project Leader

Enrollment Type (Circle One): **N**-New Enrollment **R**-Re-Enrollment **Drop** from Club

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: IA Zip \_\_\_\_\_

School: \_\_\_\_\_ Year in 4-H: \_\_\_\_\_

Gender: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Other 4-H Memberships: \_\_\_\_\_

Ethnic (Circle One): **C**aucasion **A**frican Am. **A**m. Indian **H**ispanic **A**sian Am. **M**ixed

Residence (Circle One): **F**arm **R**ural under 10,000 **T**own 10,000-50,000 **S**uburb Over 50,000 **C**ity Over 50,000

Project Name	Project Level	Project name	Project Level
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I want the Extension Office to be aware of the following disability: \_\_\_\_\_

I give permission to have my image/voice used by the ISU Extension for educational purposes. I understand that my image/voice will be used to help illustrate and explain the educational programs of ISU Extension.

Parent Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State IA Zip \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

Family E-mail: \_\_\_\_\_

Occupation (optional): \_\_\_\_\_

Parent Type (Circle One): **P**imary Parent **A**dditional Parent **O**ther **L**egal Guardian: Yes/No

**\*\*\*If you are a new member, how did you find out about 4-H (please list a member name if you heard about 4-H through one of our current members)?** \_\_\_\_\_

Member Signature \_\_\_\_\_

Leader Signature \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_