

Kentucky 4-H Enrollment System (7/04)



Garrard County

Member Form

Club Name or Teacher Name: _____

FOR OFFICE USE ONLY		
County Code: _____	Club Code: _____	Member Code: _____

Category (Circle One): 1) Member 2) Cloverbud/Mini 4-H

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

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

Address: _____ City: _____ State KY Zip _____

School: _____ Year In 4-H: _____

Gender: _____ Birthday: ____/____/____ Age: _____ Grade: _____

Other 4-H Memberships: _____ E-mail: _____

Ethnic (circle one): 1) Hispanic 2) Not Hispanic

Race (circle all that apply): 1) White 2) Black 3) Asian 4) Other: _____

Residence (circle one): 1) Farm 2) Rural/10,000

Do you require an accommodation for a disability to participate in 4-H? _____

<i>4-H Topics/Subjects/Activities</i>		
If you are interested in any of the following, please check to receive information.		
<input type="checkbox"/> Day Camps	<input type="checkbox"/> Ham Club	<input type="checkbox"/> Livestock Club
<input type="checkbox"/> Livestock Judging	<input type="checkbox"/> Horse Club	<input type="checkbox"/> Shooting Sports Club
<input type="checkbox"/> Teen Club	<input type="checkbox"/> County Talk Meet	<input type="checkbox"/> County Demonstrations
<input type="checkbox"/> Teen Summit	<input type="checkbox"/> Teen Conference	<input type="checkbox"/> Issues Conference
<input type="checkbox"/> Summer 4-H Camp	<input type="checkbox"/> County Fair	<input type="checkbox"/> Bicycle Rodeo

UK COOPERATIVE EXTENSION SERVICE University of Kentucky – College of Agriculture

Parent Information

FOR OFFICE USE ONLY

Parent Last Name: _____ First Name: _____ M.I. _____
Address: _____ City: _____ State _____ Zip _____
Home Phone: (____) _____ - _____ Work Phone: (____) _____ - _____
Legal Guardian: Yes / No E-mail: _____

Authorization of Use

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- ✓ University Promotion/Advertising
- ✓ Local/regional/national news media (w/permission of the University of Kentucky)

Signature of Parent or Guardian: _____ Date: _____

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