



Wisconsin 4-H Member Enrollment Form



Please Print Information

County _____ 4-H Club _____

Last Name _____ First Name _____ MI _____

Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Birthdate _____ Gender: Male Female

Grade _____ School Name _____ Year in 4-H (Incl. this yr.) _____

E-mail address where you'd like to receive communication _____

If available, I'd prefer electronic communication: Yes No

Residence: Farm Rural non-farm or Town less than 10,000
 Town/City 10,000 to 50,000 Suburb of City over 50,000 City over 50,000

Ethnicity: (check one): Hispanic or Latino - OR - Not Hispanic or Latino

Race (check all that apply): White Black or African American
 American Indian or Alaskan Native Asian
 Native Hawaiian or Other Pacific Islander More than one Race Undetermined

Parent/Guardian(s) Residing at the Same Address as the Member

Parent/Guardian Name(s) _____

Work Phone _____ Cell Phone _____

Parent's E-mail _____

Please attach additional parent/guardian name(s) and contact information to this form

Project Enrollment - For more projects, please attach an additional page.

<u>Project Code</u>	<u>Project Name</u>	<u>(Year in Project)</u>	<u>Need Literature</u>
_____	_____	_____	Yes or No
_____	_____	_____	Yes or No
_____	_____	_____	Yes or No
_____	_____	_____	Yes or No
_____	_____	_____	Yes or No
_____	_____	_____	Yes or No
_____	_____	_____	Yes or No
_____	_____	_____	Yes or No

Yes No I grant the University of Wisconsin Board of Regents and University of Wisconsin-Extension (hereinafter University) the right to publish, and copyright my image (including audio, moving image or photography) for educational programs, websites, and promotion of University programs.

Yes No I want the University of Wisconsin-Extension to keep my name and contact information private when creating a public record or list.

Yes No I require an accommodation for a disability to participate in this program.

Member Signature _____ Leader Signature _____

Parent/Guardian Signature _____ Date _____



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