



2015-2016 Wisconsin 4-H Member Enrollment



Family Email _____ 4-H Club _____
 Last Name _____ First Name _____ MI _____
 Street / Mailing Address _____
 City _____ State _____ Zip _____
 Date of Birth ____ / ____ / ____ Gender: Male Female
 Home Phone (____) _____ Cell Phone (____) _____
 I Prefer: USPS Mail E-mail Communication
 I wish to receive notices via text message: Yes No Cell Phone Company _____
 Year in 4-H (Incl. this yr.) _____ Member Email (if different from family): _____

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

Name(s) _____	_____
Cell Phone (____) _____	_____
Work Phone (____) _____	_____
E-mail _____	_____

Parent/Guardian(s) Residing at a Different Address From the Member

Send correspondence to this household: Yes No via: USPS Mail E-mail Communication

Parent/Guardian Name(s) _____
 Home Phone (____) _____
 Street / Mailing Address _____
 City _____ State _____ Zip _____
 Parent/Guardian's E-mail _____

Emergency Contact Name(s) _____ Relationship to Member _____
 Home Phone (____) _____ Cell Phone (____) _____

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 Prefer Not to State

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

Are you a leadership position (Youth Leader, Club Officer, etc.)?: Yes No
 If yes, what is your leadership role? _____

Is your parent/guardian/sibling a member of the military? Yes No If yes, Which Branch? _____

Grade _____ School Name _____



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Yes No I grant 4-H Youth Development, UW-Extension and the University of Wisconsin Board of Regents the right to publish, and copyright my image (including audio, moving image or photography) for educational programs, websites, and promotion of its programs.

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

Project Enrollment

<u>Year in Project</u>	<u>Project</u>	<u>Need Literature</u>
_____	_____	Yes or No
_____	_____	Yes or No
_____	_____	Yes or No
_____	_____	Yes or No
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_____	_____	Yes or No
_____	_____	Yes or No
_____	_____	Yes or No

Member Signature _____ Leader Signature _____

Parent/Guardian Signature _____ Date _____



An EEO/AA employer, the University of Wisconsin-Extension provides equal opportunities in employment and programming including Title IX and American with Disabilities Requirements.



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Project Enrollment

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