

2017-2018 DUES & INSURANCE

4-H Club Name _____

Contact Person & Phone _____

Return to UWEX Office by NOVEMBER 1st – 4HOnline enrollments will not be processed until payment is received

PLEASE REMIT 2 (TWO) SEPARATE CHECKS – one for insurance, one for dues

American Income Life Insurance

___ # of youth	Horse Project and Horseless Horse Project Members	x \$2 =	\$
___ # of youth	Cloverbud and all other Project Members	x \$1 =	\$
___ # of adult	Horse and Horseless Horse Project Leaders	x \$2 =	\$
___ # of adult	Any Other Adult Volunteer 4-H Leaders	x \$1 =	\$
Total Insurance Premium			\$

Make **one check for Insurance** only - payable to **Washington County 4-H Leaders Association**

Youth Membership Dues

___ # of youth	Literature – 4-H Members and Cloverbuds	x \$1.00 =	\$
___ # of youth	Wisconsin 4-H Foundation	x \$1.50 =	\$
___ # of youth	Washington County 4-H Youth Development Program	x \$1.50 =	\$
Total Membership Dues			\$

Make **one check for Membership Dues** only - payable to **Washington County 4-H Leaders Association**

Office Use

Date Received _____

Person Submitting _____

Club Check # Insurance _____

Club Check # Dues _____