



4-H Enrollment Form



Name of 4-H Group/Unit _____ Year: _____

Member Name: _____

First Middle Last

Address: _____

Street Address City State Zip Code

Phone: (____) _____ Email: _____ County: _____

Gender*: Male Female Date of Birth: _____ Grade: _____ School Attending: _____

Do you Live*: Farm City over 50,000 people
(Choose only one) Town under 10,000 or rural non-farm Suburbs of city over 50,000 people
 City 10,000-50,000 people Military Installation: _____

Do you have parent/guardian(s) active in the military? Yes _____ No _____
If yes, circle all that apply: Army Air Force Navy Marines Coast Guard National Guard (Air & Army) Reserves

Ethnic group*: A. Choose One Hispanic or Latino Non-Hispanic or Latino
B. Choose all that apply:
 White or Caucasian Asian
 Black or African American Native Hawaiian or other Pacific Islander
 American Indian or Alaska Native Other _____

Parent or Guardian: _____

First Middle Last

Address: _____

Street Address City State Zip Code

Phone: (____) _____ (____) _____

Area Code Daytime/Cell phone Area Code Home phone Email (if applicable)

Additional Parent or Guardian: _____

First Middle Last

Address: _____

Street Address City State Zip Code

Phone: (____) _____ (____) _____

Area Code Daytime/Cell phone Area Code Home phone Email (if applicable)

1. A parent or guardian should sign below whichever statement you wish to apply to the youth's involvement in 4-H programs.

_____ I agree to allow 4-H to take photographs/audio/video of my child for use in 4-H and other N.C. Cooperative Extension educational, promotional, and/or marketing materials. Neither individual addresses nor telephone numbers will be published within these materials.

_____ I do not wish for 4-H to take photographs of my child for use in 4-H or N.C. Cooperative extension educational, promotional, or marketing purposes.

2. The enrolling youth is bound by the NC 4-H Code of Conduct and Disciplinary Procedure for 4-H events and activities. The youth should initial here if he/she has received and reviewed the NC 4-H Code of Conduct and Disciplinary Procedure for 4-H events and activities. _____

** This information is required for all federally assisted programs and is solely used for the purpose of determining compliance with Federal civil rights laws; your responses will not affect consideration of your application. By providing this information, you will assist us in assuring that this program is administered in a nondiscriminatory manner.*



office use only
4-H Membership # _____
Date entered: _____